**Polar Research Call**

Specific call for research proposals 2022

‘FULL PROPOSAL DESCRIPTION’

(Compulsory document – must be completed)

*Before completing, please read carefully the* ***Information document containing also the submission and evaluation guidelines and budget rules****.*

|  |
| --- |
| PROPOSAL’s ID |
| Proposal Acronym  | Click here to enter text. |
| Proposal Title | Click here to enter text. |

*Please note that the font used to complete the documents must be Calibri, size 11, with 1.15 line spacing.*

# PROMOTOR/PARTNERSHIP

|  |
| --- |
| COORDINATOR (P1) |
| Organisation name: | Click here to enter text. |
| Type of organisation: | Click here to enter text. |
| Website: | Click here to enter text. |
| Principal investigator |  |
| Last name: | Click here to enter text. |
| First name: | Click here to enter text. |
| Email: | Click here to enter text. |
| Phone number: | Click here to enter text. |
| Gender: | [ ]  Female[ ]  Male[ ]  Non-binary[ ]  Transgender[ ]  Intersex[ ]  Let me type…[ ]  I prefer not to say |

|  |
| --- |
| PARTNER 2 (P2) for network projects |
| Organisation name: | Click here to enter text. |
| Type of organisation: | Click here to enter text. |
| Website: | Click here to enter text. |
| Principal investigator |  |
| Last name: | Click here to enter text. |
| First name: | Click here to enter text. |
| Email: | Click here to enter text. |
| Phone number: | Click here to enter text. |
| Gender: | [ ]  Female[ ]  Male[ ]  Non-binary[ ]  Transgender[ ]  Intersex[ ]  Let me type…[ ]  I prefer not to say |

*Copy the table to include more partners if needed.*

|  |
| --- |
| INTERNATIONAL PARTNER 1 (IP1) for network projects |
| Organisation name: | Click here to enter text. |
| Country: | Click here to enter text. |
| Type of organisation: | Click here to enter text. |
| Website: | Click here to enter text. |
| Principal investigator |  |
| Last name: | Click here to enter text. |
| First name: | Click here to enter text. |
| Email: | Click here to enter text. |
| Phone number: | Click here to enter text. |
| Gender: | [ ]  Female[ ]  Male[ ]  Non-binary[ ]  Transgender[ ]  Intersex[ ]  Let me type…[ ]  I prefer not to say |

*Copy the table to include more international partners if needed.*

# PROPOSAL SUMMARY (max. 2 pages)

|  |
| --- |
| Click here to enter text. |

Project duration: 2, 3 years *(delete as appropriate)*

# COMPLIANCE WITH THE SCOPE OF THE CALL (max. 0,5 pages)

|  |
| --- |
| Click here to enter text. |

# RESEARCH DESCRIPTION

## OBJECTIVES AND STATE OF THE ART (max. 3 pages without references)

## Research objectives and state of the art

|  |
| --- |
| Click here to enter text. |

## Scientific risk of the project in relation to its objectives

|  |
| --- |
| Click here to enter text. |

## Translation of the research objectives into appropriate and well-described methodology (max. 10 pages)

## Methodological approach

|  |
| --- |
| Click here to enter text. |

## Methodology

|  |
| --- |
| Click here to enter text. |

## Gender

|  |
| --- |
| Click here to enter text. |

## Ethic aspects

|  |  |  |
| --- | --- | --- |
| **Humans** | **YES** | **NO** |
| \* | Does the proposed research involve humans (children, patients, volunteers, vulnerable people)? | [ ]  | [ ]  |
| **Human Embryo/Foetus** | **YES** | **NO** |
| \* | Does the proposed research involve human embryos? | [ ]  | [ ]  |
| \* | Does the proposed research involve human foetal tissues/cells? | [ ]  | [ ]  |
| \* | Does the proposed research involve human embryonic stem cells? | [ ]  | [ ]  |
| **Human Cells and/or Tissues** | **YES** | **NO** |
|  | Does your research involve the use of human cells or tissues (other than from human embryos and/or foetuses)? | [ ]  | [ ]  |
| **Privacy** | **YES** | **NO** |
|  | Does the proposed research involve collection and/or processing of genetic information or personal data (e.g. health, sexual lifestyle, ethnicity, political opinion, religious or philosophical conviction)? | [ ]  | [ ]  |
|  | Does the proposed research involve tracking the location or observation of people? | [ ]  | [ ]  |
| **Animals** | **YES** | **NO** |
|  | Does the proposed research involve research on animals? | [ ]  | [ ]  |
| \* | Are those animals non-human primates? | [ ]  | [ ]  |
| **Environment, Health and Safety** | **YES** | **NO** |
|  | Does your research involve any activities or the use of elements that may cause harm to the environment, animals, or plants (e.g., GMO plants, microorganisms, etc.)? | [ ]  | [ ]  |
|  | Does your research involve the use of elements (toxic chemicals, explosives, radioactive material, etc.) that may cause harm to humans, including the research staff? | [ ]  | [ ]  |
| **Other Ethical Issues** | **YES** | **NO** |
|  | Are there any other foreseen activities that may raise ethical issues or that should be taken in consideration? | [ ]  | [ ]  |
|  | If yes please specify: Click here to enter text. |

# IMPLEMENTATION

## 4.0 Single team project expertise (only for single team project) (max. 3 pages)

Click here to enter text.

## 4.1. Network expertise (only for network project)

## Individual quality of the partners (max. 3 pages/partner)

|  |
| --- |
| Click here to enter text. |

## Adequacy and added value of the partnership in addressing the topic (max. 1,5 pages)

|  |
| --- |
| Click here to enter text. |

## Gender (max 0,5 page)

|  |
| --- |
| Click here to enter text. |

## Detailed description of the work plan

## Detailed description of the work plan (max. 0,5 pages/WP)

|  |
| --- |
| Click here to enter text. |

## Work planning and time schedule: Gantt chart (fill in the Gantt chart)

Leave this section empty.

## Implementation risk management (max. 1,5 pages)

|  |
| --- |
| Click here to enter text. |

* Table: Risk Likelihood vs. Impact

|  |  |
| --- | --- |
|  | IMPACT |
| Negligible | Minor | Moderate | Significant | Severe |
| LIKELIHOOD | Very likely |  |  |  |  |  |
| Likely |  |  |  |  |  |
| Possible |  |  |  |  |  |
| Unlikely |  |  |  |  |  |
| Very unlikely |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| COLOUR CODE: |  | Low |  | Low-Medium |  | Medium |  | Medium-High |  | Severe |

## Data management plan

## Will data be collected, reused and/or generated?

|  |  |
| --- | --- |
| The proposal will … | [ ]  COLLECT DATA[ ]  REUSE EXISTING DATA[ ]  GENERATE NEW DATA |
| *Please describe:** *Which data you will collect/reuse/generate*
* *How data will be collected / from which source it will be reused / how will it be generated*
* *Its content, technical format and estimated volume.*
* *Any existing constraints regarding its use.*
 |
| Click here to enter text. |

## How are legal issues handled?

|  |  |
| --- | --- |
| The proposal will use / process / store **personal** data: | [ ]  YES[ ]  NO |
| *If your answer is* ***‘YES’****: shortly describe the kind of personal data.**Add the process and reference to your file in your host institution’s privacy register.*  |
| Click here to enter text. |
| The work undertaken in the project will possibly result in research data with potential for technology transfer and valorisation: | [ ]  YES[ ]  NO |
| *If your answer is* ***‘YES’****, your proposal must take into account possible intellectual property issues.**Explain who will be the owner of the data (who will have the rights to control access).**Indicate whether there will be intellectual property rights/restrictions for the data you created, and if applicable, describe how these will be managed.* |
| Click here to enter text. |
| Will agreements with 3rd parties restrict the dissemination or exploitation of the data the project will (re)use: | [ ]  YES[ ]  NO |
| *If your answer is* ***‘YES’****: explain which data are affected by this agreement**State the restrictions that are in place.* |
| Click here to enter text. |

## How is the project data documented?

|  |
| --- |
| What documentation will be provided to enable understanding and reuse of the data collected / generated in this project? |
| Click here to enter text. |
| Metadata standards will be used: | [ ]  FOR ALL DATA[ ]  FOR SOME DATA[ ]  FOR NONE OF THE DATA |
| * *if your answer is* ***‘for all data’*** *or* ***‘for some data’****, please describe in detail which standards will be used.*
* *if your answer is* ***‘none of the data’****, please state in detail which metadata will be created to make the data easy/easier to find and reuse.*
 |
| Click here to enter text. |

## Data storage and backup during the BELSPO project

|  |  |
| --- | --- |
| The data will be stored in…  | [ ]  Institution Networked Research Storage[ ]  OTHER |
| *If your answer includes ‘****OTHER’****:** *Specify which storage solutions you will use during the project, in addition to / instead of the institutional networked research storage.*
* *Explain the reasons for using these solutions. E.g. because you need more space than offered by your institution; to facilitate data sharing with collaborators; or because your data requires additional security.*
 |
| Click here to enter text. |
| How will the data be backed up?  |
| Click here to enter text. |
| How will data security and protection of sensitive data be taken care of during the research?  | [ ]  Not applicable (there are no sensitive data)[ ]  Default security of the institution networked research storage[ ]  Additional security measures  |
| *If your answer is* ***other than ‘Not applicable’****: Describe the main risks and how these will be managed.* |
| Click here to enter text. |
| What are the expected costs for data storage and backup during the project?How will these costs be covered?  |
| *Costs related to data storage and backup during the project can be covered by the project budget providing these are fully justified and relate to the project.* |
| Click here to enter text. |

## Data preservation in the long term - after the BELSPO project

|  |  |
| --- | --- |
| All data will be preserved in the long term (at least 10 years)  | [ ]  YES[ ]  NO |
| *If your answer is* ***‘NO’****: clearly describe what data will be preserved long-term and what data will be destroyed for contractual, legal or regulatory purposes, or for physical preservation issues. Indicate how you will decide which data to keep.* |
| Click here to enter text. |
| The data will be archived within…  | [ ]  Institution Networked Research Storage[ ]  OTHER |
| *If your answer includes ‘****OTHER’****: Specify which storage solutions you will use in the long term, in addition to/instead of the institutional networked research storage. Please explain the reasons for using these solutions.* |
| Click here to enter text. |
| How will data security and protection of sensitive data be taken care in the long term?  | [ ]  Not applicable (there are no sensitive data)[ ]  Default security of the institution networked research storage[ ]  Additional security measures  |
| *If your answer is* ***other than ‘Not applicable’****: Describe the main risks and how these will be managed. Inquire with your institution's research support staff whether your intended storage solution meets your institution's data security policy if your research involves sensitive data.* |
| Click here to enter text. |
| What are the expected costs for data preservation in the long term?How will these costs be covered?  |
| *Costs related to data preservation in the long term can be covered by the project budget providing these are fully justified and relate to the project.* |
| Click here to enter text. |

## Data sharing and reuse

|  |  |
| --- | --- |
| Are there any factors restricting or preventing the sharing or reuse of the data (e.g. agreements with 3rd parties): |  [ ]  YES [ ]  NO |
| *If your answer is* ***‘YES’****: explain which data are affected by this agreement.**State the restrictions that are in place.* |
| Click here to enter text. |
| Which data will be made available to the public?  | [ ]  ALL[ ]  SOME PART[ ]  NONE |
| *If your answer is* ***‘SOME PART’*** *or ‘****NONE’****:** *Indicate the restrictions on the sharing of the data (why can’t it be shared)*
* *Explain what data sharing agreement will be implemented*
* *Explain what actions will be taken to overcome or to minimize restrictions.*
 |
| Click here to enter text. |
| Where/how will data be made available to the public?  | [ ]  Open Access repository[ ]  In a restricted access repository[ ]  Upon request by mail[ ]  Other (specify) |
| *If your answer is* ***other than ‘Open Access repository’****: Indicate where and how access will be provided.* |
| Click here to enter text. |
| When will data be made available to the public?  | [ ]  As soon as corresponding communication(s) are published[ ]  After the project is finished[ ]  After the completion of the project (with embargo) |
| *If your answer is* ***other than ‘as soon as corresponding communication(s) are published’****: Indicate the reasons for the restrictions on the time release of data (embargo periods). For example, to publish, protect intellectual properties, or seek patents.* |
| Click here to enter text. |
| Who will be able to access the data and under which conditions?  |
| Click here to enter text. |
| Which data will be made available for re-use?  | [ ]  ALL[ ]  SOME PART[ ]  NONE |
| *If your answer is* ***‘SOME PART’*** *or ‘****NONE’****: Indicate the restrictions on the re-use of the data. Explain what actions could be taken to overcome or to minimize restrictions.* |
| Click here to enter text. |
| Under what license will be data shared for re-use?  | [ ]  Creative Commons CCO[ ]  Creative Commons CC-BY[ ]  Other (specify) |
| *If your answer is* ***’OTHER’****: Indicate which license will the data have for reuse, and why.* |
| Click here to enter text. |
| What are the expected costs for data sharing? How will these costs be covered?  |
| *Costs related to data sharing can be covered by the project budget providing these are fully justified and relate to the project.* |
| Click here to enter text. |

## Responsibilities

|  |
| --- |
| Who will be responsible for the data documentation & metadata? |
| *In case of the use of personal data, please note the name and contact data of the concerned data protection officers.* |
| Click here to enter text. |
| Who will be responsible for data storage & back up during the project? |
| Click here to enter text. |
| Who will be responsible for ensuring data preservation and sharing? |
| Click here to enter text. |
| Who bears the end responsibility for updating & implementing this DMP?  |
| *Default response: The Principal Investigator (PI) bears the overall responsibility for updating & implementing this DMP.* |
| Click here to enter text. |

# IMPACT

## Potential impact of the of the proposal in light of the expected outcomes (max 1,5 pages)

|  |
| --- |
| Click here to enter text. |

## Follow-up committee (max. 2 pages)

|  |
| --- |
| Click here to enter text. |

## Follow-up committee member intent (non-mandatory - duplicate the requested information as appropriate)

|  |  |
| --- | --- |
| First and Last name: | Click here to enter text. |

|  |  |
| --- | --- |
| Gender: | [ ]  Female[ ]  Male[ ]  Non-binary[ ]  Transgender[ ]  Intersex[ ]  Let me type…[ ]  I prefer not to say |

|  |  |
| --- | --- |
| Institution and unit: | Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Tel:  | Click here to enter text. | Email: | Click here to enter text. |

|  |  |
| --- | --- |
| Website: | Click here to enter text. |

|  |
| --- |
| Describe what aspect(s) of the project is/are of interest to you and why: |
| Click here to enter text. |
| Describe with what information/data/support/... you could contribute to the project:  |
| Click here to enter text. |

|  |  |
| --- | --- |
|  |  |

## Plans to maximise the impact of the project (science and other) (max. 3 pages)

|  |
| --- |
| Click here to enter text. |

# RESEARCH BUDGET

## Budget overview:

## Single team project

## Budget of the coordinator (P1): Name and Institution

*Double mouse click on table to open the excel sheet*



## Network project

## Consortium budget overview

*Double mouse click on table to open the excel sheet*



## Budget of the coordinator (P1): Name and Institution

*Double mouse click on table to open the excel sheet*



## Budget of Partner 2 (P2): Name and Institution (duplicate if necessary, with necessary partner-number changes)

*Double mouse click on table to open the excel sheet*



## Budget of the international Partner 1 (IP1): Name and Institution (duplicate if necessary, with necessary partner-number changes)

*Double mouse click on table to open the excel sheet*



## Justification of the requested budget

## Budget justification for the Coordinator (single team project and network project) (C=P1): Name and Institution

Staff

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personnel’s name (*if known*) and profile (e.g. Name, PhD in economics, 2 years experience) | P/Mto be financed | Estimated full time monthly cost | Total Cost | P/Mnot financed |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Specific Operation

|  |  |
| --- | --- |
| Description: | Cost |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. |

Equipment

|  |  |
| --- | --- |
| Description: | Cost |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. |

Subcontracting

|  |
| --- |
| Name: Click here to enter text.Address: Click here to enter text. |
| Description of tasks: | Cost |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

## Budget justification for Partner 2 (P2) (only for network project): Name and Institution (duplicate if necessary, with necessary partner-number changes)

Staff

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personnel’s name (*if known*) and profile (e.g. Name, PhD in economics, 2 years experience) | P/Mto be financed | Estimated full time monthly cost | Total Cost | P/Mnot financed |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Specific Operation

|  |  |
| --- | --- |
| Description: | Cost |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. |

Equipment

|  |  |
| --- | --- |
| Description: | Cost |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. |

Subcontracting

|  |
| --- |
| Company name: Click here to enter text.Address: Click here to enter text. |
| Description of tasks: | Cost (3) |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. |

## Budget justification for the international Partner 1 (IP1): Name and Institution (duplicate if necessary, with necessary partner-number changes)

Staff

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personnel’s name (*if known*) and profile (e.g. Name, PhD in economics, 2 years experience) | P/Mto be financedby BELSPO | Estimated full time monthly cost | Total Cost | P/Mfinanced by other means |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Operation

|  |  |  |
| --- | --- | --- |
| Description: | Cost to be financed by BELSPO | Cost financed by other means |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **TOTAL** | Click here to enter text. | Click here to enter text. |

## Polar campaign budget - if applicable

## Campaign budget for the Coordinator: Name and Institution

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EURO** | **2023** | **2024** | **2025** | **TOTAL** |
| Number of participants |  |  |  |  |
| Estimated budget |  |  |  |  |

## Campaign budget for Partner 2: Name and Institution (duplicate if necessary, with necessary partner-number changes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EURO** | **2023** | **2024** | **2025** | **TOTAL** |
| Number of participants |  |  |  |  |
| Estimated budget |  |  |  |  |

|  |
| --- |
| Detailed campaign information (duplicate if necessary) |
| Destination (Arctic or Antarctic) | Click here to enter text. |
| Year and period | Click here to enter text. |
| Min. number of weeks needed on site/onboard | Click here to enter text. |
| Organiser (national operator) | Click here to enter text. |
| Campaign name | Click here to enter text. |
| N° of participating project staff | Click here to enter text. |
| Area/place(s) of the terrain work | Click here to enter text. |
| Short description of work to be performed on site | Click here to enter text. |
| Cargo in and out: estimation of total weight IN and total weight OUT: | Click here to enter text. |