ADMINISTRATIVE INFORMATION

Answers are expected in the coloured cells.

| | Sectio | n I: General | Information | |
|--|---|------------------|-------------|--------|
| If your organization has (PIC) please provided | | | | |
| More info. http://ec.europa.eu/research/participants/portal/desktop/en/organisations/register.html | | | | |
| Organisation legal name | | | | |
| Short name proposed (8 characters max.) | | | | |
| | Street name | | | |
| | Number | | | |
| Legal Address | Town | | | |
| | Postal code/Cedex | | | |
| | Country | | | |
| Internet homepag | e | | | |
| Please indicate all that applie. | | ?s: | | |
| | Non-profit organisat | ion | Yes/No | |
| Status of the | Public body | | Yes/No | |
| organisation | Research organisation | on | Yes/No | |
| | Higher or secondary education establishment | | Yes/No | |
| NACE code | | | | |
| Is your number of | employees smaller than 250 | ? (full time equ | uivalent) | Yes/No |
| Is your annual turnover smaller than € 50 million? | | on? | | Yes/No |
| Is your annual balance sheet total smaller than € | | € 43 million? | | Yes/No |
| Are you an auton | omous legal entity? | | | Yes/No |
| Do you conform to the Commission's definition of an SME? | | | Yes/No | |

| Section II: Contact details | | | | | | |
|--|--------|------------|--------------------|-----|--|--|
| Person in charge of the project | | | | | | |
| Family name | | | | Sex | | |
| First name(s) | | | | | | |
| Title (Prof., Dr., Mr., Ms., Mrs.) | | | | | | |
| Department/Faculty/Institute/ Laboratory name | | | | | | |
| Address (if different from the legal address) | Street | name | | | | |
| | Numb | er | | | | |
| | Town | | | | | |
| | Postal | code/Cedex | | | | |
| | Count | ry | | | | |
| Telephone number 1 | | | Telephone number 2 | | | |
| Fax number | | | | | | |
| E-mail | | | | | | |

| Section III: Your organisation in the consortium | | | |
|--|---|--|--|
| | Are there dependencies between your organisation and (an)other participant(s) in this proposal? | | |
| Dependencies of the | | organisation short name | |
| organisation with other participants | If YES, please specify | Character of dependence (choosing between the following options: same group; controlled by; controls) | |

| Section IV: Company Profile | | | |
|--|--|--|--|
| Brief description of the Company | | | |
| | | | |
| | | | |
| | | | |
| Description of your resources (equipment, human resources) in relation to the project | | | |
| | | | |
| | | | |
| Short CV of the key-persons assigned to the project. | | | |
| Person 1 | | | |
| Name: | | | |
| Title: Responsibility in the company: | | | |
| Field of excellence, Research area: | | | |
| Short curricular reference: | | | |
| Person 2 | | | |
| Name: | | | |
| Title: Responsibility in the company: | | | |
| Field of excellence, Research area: | | | |
| Short curricular reference | | | |
| | | | |
| Person 3 Name: | | | |
| Title: | | | |
| Responsibility in the company: | | | |
| <u>Field of excellence, Research area:</u> <u>Short curricular reference.</u> | | | |
| Interest in project (please detail here why you are participating in this project, what are your | | | |
| expectations) | | | |
| Relevance of the project | | | |
| to the partner activity Briefly explain the reason | | | |
| why you have decided to | | | |
| join this project | | | |
| Briefly discuss how does | | | |
| your organisation intend to disseminate/exploit the | | | |
| project results | | | |

| Briefly explain whether you envisage that any of the EU ethical issues may arise from the project-related activities. If any, please discuss how do you propose to face it. | | |
|--|--------------|---|
| Also, discuss whether there are project-related activities that conflict with your national legislation | | |
| Experience of your orga | nisation | |
| References (publications), and patents related to the project (3 recent publications) Previous participation in national or European research projects, other research collaborations related to the project (reference + short description) Dissemination/exploitation capabilities (briefly discuss the network of contacts that may support your organisation in disseminating/exploiting the project results): | | |
| Similar proposal | | |
| Previously submitted similar proposals or signed contracts? | NO If YES | Programme name(s) and year Proposal number(s) or contract number |
| | | |

| Section VII: Accounting Information | | | |
|---|--|--|--|
| Personnel cost: Average monthly rate, without overheads | | | |