**For the Supervisory Board of SE**

*Prior to the application of national / international proposals*

**Registry number of the applicant institution:**

|  |  |
| --- | --- |
| **Basic data:** |  |
| Code of the call: |  |
| Title of the call: |  |
| Publication date of the call: |  |
| Deadline of the call: |  |
| Title of the project: |  |
| Implementation period of the project: | (eg.: 01-01-2016 – 12-31-2017) |
| Implementation location of the project: |  |
| **Budget details:** |  |
| Grant amount (total): | (eg.: 500.000 EUR) |
| Grant amount (SE part): | (eg.: 500.000 EUR) |
| Grant intensity: | % |
| Type of financing: | (eg.:pre-/post-financing) |
| Amount of downpayment: |  |
| Source of downpayment: |  |
| Amount of pre-financing: | % |
| Amount of overhead: | % |
| Source of 20% central withdrawal: | eg. overhead |
| **Equipment purchase** (high value): (underline) | yes / no |
| Name(s) of equipment(s): |  |
| Value(s) of equipment(s): |  |
| Place(s) of equipment(s): |  |
| Costs expected in the maintenance period: |  |
| Name of cost-bearing institution: |  |
| **Participating organizations:** |  |
| Name of consortium leader organization: |  |
| Name of consortium member nr1: |  |
| Name of consortium member nr2: |  |
| Name of consortium member nr3: |  |
| Name(s) of subcontractor(s): |  |
| Name(s) of cooperating partner(s): |  |
| Name of project manager: |  |
| Name of technical director: |  |
| Name(s) of SE supervisor(s): |  |
| Name of SE financial manager: |  |
| Name of SE contact person: |  |
| Phone number of SE contact person: |  |
| E-mail address of SE contact person: |  |
| Technical content: (max. 1000 characters) |  |
| Project’s relevance to Semmelweis University Institutional Development Plan |  |
| Any other special condition(s) for submission |  |
| Any other remark/comment |  |

Budapest, ……………………….-2016

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director of the applicant institution