

EUROCORES PROGRAMME
Development of a Stem Cell Tool Box
(EuroSTELLS)

OUTLINE Proposals

Application GUIDELINES:

The completed form should be sent by **e-mail** (in one attachment only) in **pdf, doc** or **rich text format (rtf)** to the Medical Sciences Unit, EuroSTELLS: eurostells@esf.org by 30 April 2004.

- 1. Title of the Proposal of the Collaborative Research Project** (with acronym):
- 2. Project Leader (one of the Principal Investigators of the Collaborative Research Project and main contact person to the ESF)**
Name & Title:
Department / Institute: (complete address, phone & fax numbers, e-mail)
- 2. Name(s) of the Principal Investigator(s) of the Individual Projects in the Collaborative Research Project** (including associated partners):
Names & Titles:
Departments / Institutes: (complete address, phone & fax numbers, e-mail address)
- 3. Key words** (max. 5)
- 4. Proposed Start Date and Length of the Collaborative Research Project:**
(in number of months)
- 5. Short Description of the Collaborative Research Project, including Project Aims and Objectives as well as Methodology and Experiments** (2 pages max.) and a short description how the partners contribute to the Collaborative Research Project.
- 6. Estimation of Requested Budget** (in Euros)
(as far as they are consistent with the rules of your national funding agency; please also add here additional information that is requested by your national funding agency, Please contact your national funding agency if you have questions about this):

Include the following headings:

- a) Salary Costs (non-permanent staff, fellowships, studentships if not available by parallel funding)
- b) Equipment per Item
- c) Travels, Workshops, Participation in Conferences etc.
(including networking within the CRP)
- d) Consumables/Running Costs/Other Costs
(including publication)
- e) Others
- f) TOTAL

- 7. Annex: A short CV (1-page maximum) of each Principle Investigator of the CRP**
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