**Full proposal for an Advanced Project**

Applicant(s)

Name of the applicant

Institute/ Department

Further Applicant

Name of the further applicant

Institute/ Department

Further Applicant

Name of the further applicant

Institute/ Department

Project title

Project title

* After completion of the form please delete all comments in blue letters and also this box. All your information should be in black letters.
* Please do not change the format of the document: *Font type Arial, size 11,
1.5 line spacing*
* The entire project proposal should not be longer than 15 pages (without this cover page).
* Do not add any header lines or page numbers as we merge all applications.

# State-of-the art

Please explain briefly and precisely the state of the art in your field in its direct relationship to your project.

Bibliography concerning state of the art and the research objectives

This bibliography is not the list of the applicant’s publications. Please list a maximum of 10 publica-

tions. *Font type Arial, size 10, 1.0 line spacing*

# Preliminary work

This description should make clear in which context you situate your own research. This description must be concise and understandable without referring to additional literature*.*

# Own publications and patents in the topic

## Original publications in the topic

xxx

## Overviews and reviews in the topic

xxx

## Own patents in the topic

xxx

# Objectives

Detailed explanation of essential project objectives

# Work programme including proposed research methods

Please give a detailed account of the steps and methods planned during the proposed funding period. Please explain the contribution of each applicant.

# Schedule

Please provide a schedule detailing all planned experiments

# Clinical relevance of the project

Short explanation of the clinical perspective

# Potential benefits and risks

Please indicate how you intend to transfer the project to an external funding agency. Also describe potential challenges to your project.

# Basic equipment and composition of the working group

## Available basic equipment (laboratory, devices)

Please describe available laboratories and their equipment

Available devices

|  |  |  |
| --- | --- | --- |
| **Number** | **Device** | **Institute/ department** |
|  |  |  |
|  |  |  |

## Available human resources

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Name** | **Proportional working time (%)** | **salary scale** | **Financing (budget/ third party funding – please indicate the project)** | **Institute/ department** |
| 1 | Dr. X | e.g. 20% | E13 |  |  |
| 2 | Dr. Y | e.g. 25% | E13 |  |  |
| 3 | Prof. Dr. Z |  | W2 |  |  |

## Available resources for consumables

Please indicate separately for each institute/ department

# Funding for staff

Please state planned employment duration and qualification. Please also provide a brief explanation of his/her tasks from the work programme. For single projects only one position, for tandem projects two positions are possible.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nr. | **Description** | **Salary scale (TV-L, others)** | **Volume of employment** | **Institute/ department in which the position is located** |
| 1 | Ph.D. student | 65% E13 |  |  |
| 2 | Research technician | E9 | 50% or 100% |  |

# Funding for consumables

Please specify project related consumables by subcategory (e.g. chemicals, glassware, animal breeding etc.). Costs for stem cells, microarrays or next generation sequencing may be partly covered by the High Tech Pool.

**Amount p.a.** (maximum 15 k€ in single projects/ 35 K€ in tandem projects of two different institutions)

|  |  |
| --- | --- |
| Subcategory | amount p.a. (€) |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Sum  |  |

# Planned use of the High-Tech-Pool

There is a High-Tech-Pool, which is offered by the IZKF. The High-Tech-Pool is accessible for all granted IZKF projects. Means for chip analysis, next generation sequencing or other innovative methods can be applied for. To evaluate the current need of means of the pool, we ask to state which needs there are and to tell us the amount of the needs. Please add a short calculation using the current prices. A co-payment is expected and can be paid out of project funds. The co-payment depends on the total amount and should be at least 30%. Services provided by OICE or FACS are excluded.