**PROJECT FOR INTERNATIONAL SCIENTIFIC COOPERATION**

**(PICS)**

**Please see attachment for the program description**

**Call for proposals 2015**

**APPLICATION FORM**

|  |
| --- |
| **I – PROJECT TITLE** |
| in French |
| in English |

**Duration of the project** (maximum 3 years):

**II- PROJECT COORDINATORS**

**a) In France**

**Coordinator’s last and first name**:

Title and/or position:

Telephone n.:

Email address:

**CNRS Research Structure**:

Director:

Address:

Telephone n.:

Fax n.:

Email address:

**b) In the country of the partner**

**Coordinator’s last and first name**:

Title and/or position:

**Partner Research Structure name**:

Director:

Address:

Telephone n.:

Fax n.:

Email address:

**Home organization**:

Address:

**III– PROJECT PARTICIPANTS IN THE COORDINATORS’ RESEARCH STRUCTURE/LABORATORY**

**a) In France**

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

**b) In the partner country**

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

**IV– POTENTIAL PROJECT PARTICIPANTS FROM OTHER RESEARCH STRUCUTRES/LABORATORIES**

**a) From other laboratories in France**

**Research Structure**:

Director:

Address:

Telephone n.:

Fax n.:

Email address:

**Participants**:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Email address:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Email address:

**b) In a second partner country**

**Laboratory/Research Structure name**:

Director:

Address:

Telephone n.:

Fax n.:

Email address:

**Home organization**:

Address:

**Participants**:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

Last and first name:

Title and/or position:

Full-time-equivalent in the project:

**V- SCIENTIFIC PROGRAM**

**jointly drafted by both project coordinators**

**Project summary (*in less than 10 lines)*** **specifying the distribution of research activities amongst the laboratories involved in the project (in French and English):**

**Detailed description of the research project (3 to 5 supplementary pages, *as annex 1*), specifying:**

1. 1. the position of the research topic in both national and international contexts, the project goals, possible connections
2. 2. with other scientific disciplines or applications (technological or otherwise),
3. 3. why this cooperation is necessary to accomplish the project goals, any work already carried out jointly (cite publications, theses, patents, etc.),
4. 4. the work plan and its timeline,
5. 5. partnerships and external sources of funding already secured for the topic of the PICS,
6. 6. if appropriate, the component of the project involving training of students.

**PROJECT BUDGET**

**FUNDING, REQUESTED FOR THE PICS (in thousands of Euros), supplemental to the amounts specified above (Financial Information)**

Provide an estimate of projected expenditures.

**Append a one-page “Appendix 2” specifying the names of researchers travelling or being hosted, length of visits, and nature of “other expenditure” in the framework of the project.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **In France (provided by the CNRS)** | RequestYear One | EstimateYear Two | EstimateYear Three | Total |
| Travel in the partner laboratory(ies)  |  |  |  |  |
| Hosting (under condition of reciprocity) |  |  |  |  |
| Seminar organization |  |  |  |  |
| Other expenditure (specify in ***Appendix 2***) within 20% of the total budget |  |  |  |  |
| Total |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **In Partner country**  | RequestYear One | EstimateYear Two | EstimateYear Three | Total |
| Travel to France |  |  |  |  |
| Hosting (under condition of reciprocity)  |  |  |  |  |
| Seminar organization |  |  |  |  |
| Other expenditure |  |  |  |  |
| Total |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **In second partner country**  | RequestYear One | EstimateYear Two | EstimateYear Three | Total |
| Travel |  |  |  |  |
| Hosting (under conditions of reciprocity) |  |  |  |  |
| Seminar organization |  |  |  |  |
| Other expenditure |  |  |  |  |
| Total |  |  |  |  |

**OPINION OF THE RESEARCH STRUCTURE/LABORATORY DIRECTORS**

**ON THE PROJECT**

***Detailed opinion of the Partner coordinator’s research structure/laboratory director on the scientific program, the funds available and the supplementary funds requested:***

Place and date: ………………………………….., on ………………………………

Signature

First name, last name: