

INNO4COV-19

Grant Agreement No. 101016203

**

**Open Call Proposal**

Call Information:

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| --- |
| *Identifier: INNO4COV-19 Open Cal**Project full name: Boosting Innovation for COVID-19 Diagnostic, Prevention and Surveillance.**Acronym: INNO4COV-19**Grant agreement number: 101016203* |

|  |  |
| --- | --- |
| Project Title |  |
| Project Acronym |  |

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**Note: Do not disclose any confidential information**

Please follow the structure of this template when preparing your proposal. This template is organised to ensure that all relevant aspects of your project are clearly addressed with respect to the evaluation criteria.

Applicants using other kind of template structure will be considered ineligible.

Please also respect the limits indicated in each section. If you attempt to upload a proposal that exceeds the characters limits, excess content will not be taken into consideration by the evaluation committee.

We strongly recommend that you take advantage of the different tools offered by the INNO4COV-19 Consortium to receive feedback on any questions you may have before submitting your proposal, such as webinars, FAQ sheet and Help Desk.

**Before submitting your proposal, please delete this page and the guidance text in grey in each section, and save this document as a PDF file.**

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# Project Summary

(maximum of 2.000 characters including spaces)

* *Provide a brief non-confidential description of your project.*
* *Clearly describe what is the product/technology, the need your proposal is addressing in the fight against COVID-19.*

*Note: This summary will be made publicly available once the project has been selected for funding.*

# Concept and objectives

(maximum of 7.000 characters including spaces)

* Describe the overall project idea/concept and the specific objectives of the project.
* Explain how your technological solution addresses COVID-19 related challenges that are not currently solved by existing solutions.
* Identify the technical/business and regulatory challenges and barriers expected to be solved to boost market entry of your product and what type of support is needed.
* Identify the technology readiness level (TRL) evolution through the implementation of the proposed solution.

Note:

* The objectives should be clear, measurable, realistic and achievable within the duration of the project and with the funding available. It is highly recommended to list your objectives in bullet points/table form indicating target KPIs per each objective identified.
* This section should cover how this project aligns to the INNO4COV-19 Open Call, the technological/business needs that leverages the requested support, and the approach to address the need, challenge and market opportunity identified.
* This section should also address regulatory and certification challenges/strategy.
* We strongly encourage you to include visual representations of your solution.
* Only proposals with a minimum TRL 6 will be considered eligible.

# Outcomes & Impact

(maximum of 3.000 characters including spaces)

* Describe the key outcomes of the project and the impact (that it will have on the market and in particular in relation to COVID-19).
* Explain how your company is positioned to facilitate exploitation of results. Provide a brief description of your exploitation strategy.
* Explain how the proposal is related with the vision and objectives of INNO4COV-19 and what is the added value contribution expected from the INNO4COV-19 Platform.

# Implementation

(maximum of 2.000 characters including spaces for each description)

* Describe the activities and tasks that will take place in your project and provide timing of the different activities.
* This section should answer the question “how are you going to implement the project to reach the proposed objectives?”
* We strongly recommend that regulatory and certification strategy/actions are included in the implementation.

|  |  |
| --- | --- |
| **Activity 1**  |  |
| **Start month** |  | **End month** |  |
| **Description** |
|  |
| **Milestones** |
|  |

|  |  |
| --- | --- |
| **Activity 2**  |  |
| **Start month** |  | **End month** |  |
| **Description** |
|  |
| **Milestones** |
|  |

|  |  |
| --- | --- |
| **Activity N**  |  |
| **Start month** |  | **End month** |  |
| **Description** |
|  |
| **Milestones** |
|  |

# Resources

* Please outline the estimated overall budget for the development of your project, per Activity (Table 1) and per budget item (Table 2)

**Table 1: Total budget per Activity**

|  |  |
| --- | --- |
| **Item** | **Amount (€)** |
| Activity 1 |  |
| Activity 2 |  |
| … |  |
| … |  |
| … |  |
| Total |  |

**Table 2: Total budget per item**

|  |  |  |
| --- | --- | --- |
| **Item** | **Amount (€)** | **Description & Need for the implementation** |
| Support Services |  | Please indicate which services and amount will be requested from the INNO4COV-19 Platform |
|  | Please indicate here services that will be requested outside of the INNO4COV-19 Platform |
| Personnel costs  |  |  |
| Consumables, Components, Materials  |  |  |
| Travelling and subsistence |  |  |
| Overheads (max. 15% of overall budget) |  |  |
| Total |  |  |

* In case you include personnel costs, please indicate the number of person-months (full-time equivalent) of people involved in the project in the table below.

**Table 2: Person-month & Personnel costs**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Profile** | **Person-month****(PM)\*** | **Monthly rate in Euros****(MR)** | **Direct personnel costs****(PMxMR)** | **Activities in which the HR will be involved** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total |  |  |  |  |

*\*PM is a metric for expressing the effort of a person dedicated full time in one month.*

*\*\* Actual cost only, w/o overheads*

# ANNEX: Ethical Checklist

|  |
| --- |
| 1. HUMAN EMBRYOS/FOETUSES  |
| Does your proposed work involve Human Embryonic Stem Cells (hESCs)? | Yes/No |
| Does your proposed work involve the use of human embryos? | Yes/No |
| Does your proposed work involve the use of human foetal tissues / cells? | Yes/No |
| 2. HUMANS |
| Does your proposed work involve human participants?  | Yes/No |
| Does your proposed work involve physical interventions on the study participants?  |  Yes/No |
| 3. HUMAN CELLS / TISSUES  |
| Does your proposed work involve human cells or tissues (other than from Human Embryos/Foetuses, i.e. section 1)?  | Yes/No |
| Are they available commercially? | Yes/No |
| Are they obtained within this project? | Yes/No |
| Are they obtained from another project, laboratory or institution? | Yes/No |
| Are they obtained from biobank? | Yes/No |
| 4. PROTECTION OF PERSONAL DATA  |
| Does your proposed work involve personal data collection and/or processing?  | Yes/No  |
| 5. ANIMALS  |
| Does your proposed work involve animals?  |  Yes/No |
| 6. THIRD COUNTRIES  |
| In case non-EU countries are involved, do the proposed work related activities undertaken in these countries raise potential ethics issues? | Yes/No |
| Do you plan to use local resources (e.g. animal and/or human tissue samples, genetic material, live animals, human remains, materials of historical value, endangered fauna or flora samples, etc.)? | Yes/No |
| Do you plan to import any material - including personal data - from non-EU countries into the EU? | Yes/No |
| Do you plan to export any material - including personal data - from the EU to non-EU countries? | Yes/No |
| In case your proposed work involves low and/or lower middle income countries, are any benefits-sharing actions planned? | Yes/No |
| Could the situation in the country put the individuals taking part in the proposed work at risk?  | Yes/No |
| 7. ENVIRONMENT PROTECTION  |
| Does your proposed work involve the use of elements that may cause harm to the environment, to animals or plants? | Yes/No |
| Does your proposed work deal with endangered fauna and/or flora and/or protected areas? | Yes/No |
| Does your proposed work involve the use of elements that may cause harm to humans, including research staff? | Yes/No |
| 8. DUAL USE  |
| Does your proposed work involve dual-use items in the sense of Regulation 428/2009, or other items for which an authorisation is required? | Yes/No |
| 9. MISUSE  |
| Does your proposed work have the potential for misuse of research results? | Yes/No |
| 10. OTHER ETHICS ISSUES  |
| Are there any other ethics issues that should be taken into consideration? Please specify | Yes/No |
| I CONFIRM THAT NONE OF THE ABOVE ISSUES APPLY TO MY PROPOSAL | **YES/NO** |

If the answer is ‘YES’ to any of the questions between 1 and 10, please contact INNO4COV-19 Helpdesk at info@inno4cov19.eu for guidance on the issue.

For more information on ethical issues, please consult the document provided by the European Commission:

http://ec.europa.eu/research/participants/portal/doc/call/h2020/h2020-msca-itn-2015/1620147-h2020\_-\_guidance\_ethics\_self\_assess\_en.pdf