

**Research grant application form**

Title of the document in pdf format:   
2024FRE\_Research\_Last name\_Project acronym

*Proposal to be written in English for evaluation by international experts. If the project is a re-submission, please clearly highlight the changes that were made in the proposal.*

**1. GENERAL INFORMATION**

**Project PI**

First name:

Last name:

Position/title:

Address:

Phone number:

Email:

Webpage:

ORCID:

**Project**

Title:

Acronym:

Duration:

Field of research:

Basic research, please specify sub-field: \_\_\_\_\_\_\_\_\_\_\_\_

Translational research

Clinical research

Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Keywords:**

**Has this research obtained ethical approval?**

Yes, date of approval:

Organization that delivered the approval:

In progress

No

Not applicable

*If “no” or “in progress”, please include the time frame for ethical approval in the project calendar*

**Scientific abstract:**

200-300 words

*Structure: Background, Objectives, Methods, Expected impact*

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**General Public Summary in French:**

*400 words max*

*No confidential information – if the project is selected, this information will be communicated externally by the Foundation.*

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**How did you hear about this funding call?**

Foundation’s website

Email blast

Colleague

Social media

Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. PROJECT PI**

**Short CV:**

*2 pages max, font 11*

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**List of 10 major publications in last 5 years:**

*PI name should appear in* ***bold*** *font*

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**3. PROJECT CONSORTIUM**

**Consortium dedicated to the project:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Team 1 | Team 2 | … |
| Name of Team PI |  |  |  |
| Position |  |  |  |
| Institution |  |  |  |
| Expertise |  |  |  |
| Involvement (% FTE) |  |  |  |

**Expertise, quality and complementarity of the proposed consortium:**

*1/2 to 1 page max*

*Please also describe the distribution of work*

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For each partner team PI, please provide the following information:

**Partner Team PI #1**

First name:

Last name:

Position/title:

Address:

Phone number:

Email:

Webpage:

ORCID:

List of 10 major publications within the past 5 years:

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Short CV:

*2 pages max, font 11*

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**4. SCIENTIFIC PROPOSAL**

*5 pages max, font 11*

*Structure: Background, Preliminary data, Objectives, Originality and innovation, Methodology, Project implementation, Expected impact and valorization strategy, References.*

*Please write the proposal in English for evaluation by international experts.*

*No need to define endometriosis – Scientific Committee members know about the disease.*

*The scientific committee will pay close attention to the methodology – please provide clear details of the design of the study: describe inclusion and exclusion criteria for cases and controls, sample size, power calculation…*

*Please demonstrate that the project is feasible within the time frame and indicate availability of samples/data.*

*For clinical research projects, please* ***additionally*** *fill in a Clinical Research Appendix (available on the FRE website).*

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**5. PROJECT CALENDAR**

*Please include organizational plan/chart (eg Gantt diagram), integrating time for ethical approval if needed.*

**6. BUDGET**

*Please provide a detailed budget for the project.*

|  |  |  |
| --- | --- | --- |
|  | Team 1 | Team … |
| Staff expenses |  |  |
| Equipment and material costs (including consumables) |  |  |
| Outsourcing/subcontracting |  |  |
| Travel costs and other expenses |  |  |
| Overheads |  |  |
| Subtotal |  |  |
| Total requested funding |  | |

**Budget justification:**

*Please clearly justify the requested budget, max 1/2 page*

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**Project total cost:**

*If above the FRE grant, please indicate the source of funds for the difference*

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**Other acquired grants and/or other ongoing other grant applications:**

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**7. ADMINISTRATIVE DATA**

**Project PI institution**

Legal name:

Department:

Lab/team:

Lab head name:

If different than project PI’s, please specify:

Address:

Phone number:

Email:

**Organization chart of the team:**

**Administrative/legal contact person**

Name:

Address:

Phone number:

Email: