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| **PROJECT NOTIFICATION**  |
| **CONTACT DETAILS** |
| Notifying Person/ Project Initiator  | Name and surname: |
| Organisational Unit: |
| E-mail: |
| Phone: |
| Employed at MUW (employment contract): 🞏 YES 🞏 NO |
| Person preparing the application🞏 details as for the Notifying Person/Initiator | Name and surname: |
| Organisational Unit: |
| E-mail: |
| Phone: |
| Employed at MUW (employment contract): 🞏 YES 🞏 NO |
| **PROJECT INFORMATION** |
| Project nature🞏 scientific (research and development) 🞏 didactic 🞏 investment 🞏 other (please, specify): …………………………………………………………………………………………..  |
| For a SCIENTIFIC project, the project involves:🞏 medical experiment 🞏 clinical study  |
| Project objective |  |
| Short project description |  |
| Main tasks in the project |  |
| Project Implementation Schedule | Project starting date:(month/year) ………../………. |
| Project closing date:(month/year) .……… /………. |
| **PROJECT TEAM** |
| Planned Project Lead🞏 details as for the Notifying Person/Initiator | Name and surname: |
| Organisational Unit: |
| E-mail: |
| Phone: |
| Employed at MUW (employment contract): 🞏 YES 🞏 NO |
| MUW Organisational Unit where the project will be implemented: |  |
| Planned Project Team | Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………….🞏 NO  |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ………………………………………………🞏 NO  |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ………………………………………………🞏 NO  |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO  |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO |
| Name and surnameEmployed at MUW (employment contract): 🞏 YES - Name of Organisational Unit: ……………………………………………… 🞏 NO  |
| **PROJECT FUNDING SOURCE** |
| **🞏 call was selected****🞏 in search of funding** |
| Institution organising the call |  |
| Full name of the call |  |
| **Application Deadline** | (day/ month/year) ………./………./………. |
| **PARTNERSHIP** |
| Does the project foresee partnership? | 🞏 YES 🞏 NO  |
| If YES, please indicate the role of MUW: | 🞏 LEADER 🞏 PARTNER |
| If MUW is a Partner, please indicate the PROJECT LEADER | Name of the LEADER: |
| Consortium composition | Name of PARTNER(S):1. …………………………………..
2. …………………………………
3. …………………………………….
4. ………………………………………
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| **ESTIMATED COST OF PROJECT IMPLEMENTATION** |
| **Total cost …………………..……….……….……….…… PLN, including** |
| Instrumentation: PLN ………………………………….  |
| Materials and small-sized equipment PLN …………………………….. |
| Remuneration of the Project Team PLN ……………………………………  |
| External services: PLN ……………………………….  |
| Project results dissemination (conferences, publications, etc.) PLN ………………………..  |
| Other: PLN ………………………………………………………………………………………………….. |
| **REMARKS AND COMMENTS, IF ANY** |
|  |
| **SIGNATURE** |
| **Signature of the Notifying Person / Project Initiator**Date: ………………..………. legible signature……….…………………………………….…………….……….……….……….………. |
| **Approval of the head of the organisational unit for the project implementation in the unit:**Date: ………………..………. legible signature……….…………………………………….…………….……….……….……….………. |