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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 surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ……………………………………………….  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed at MUW (employment contract):  🞏 YES - Name of Organisational Unit: ………………………………………………  🞏 NO |
| Name and surname  Employed 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. ……………………………………… |
| **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……….…………………………………….…………….……….……….……….………. | |