# Guideline and Pre-Proposal Application Form

1. **Background**

Under the umbrella of NEURON, the “Network of European Funding for Neuroscience Research” established under the ERA-NET scheme of the European Commission ([www.neuron-eranet.eu](http://www.neuron-eranet.eu)), a joint transnational call ([JTC-2024](https://www.neuron-eranet.eu/joint-calls/bio-medical/2024-brain-body/)) is now launched. The aim of the call is to facilitate multinational, collaborative research projects that will address critical translational and clinical questions concerning the role of **bidirectional brain-body interactions** on the genesis and progression of neurological and psychiatric diseases (see Call Text and [funder-specific information](https://www.neuron-eranet.eu/wp-content/uploads/NEURON_JTC2024_All_national_regulations.pdf)).

1. **Proposal submission**

There will be a **two-stage submission procedure**: pre-proposals and full proposals. Both pre- and full proposals must be written in English and must be submitted to the Joint Call Secretariat (JCS) by the coordinator through the electronic submission system exclusively (<https://ptoutline.eu/app/neuron_bb>).

**Pre-proposals** must be submitted by the project coordinator before **8th March 2024, 14:00 CET.**

**Please use the template below, you can delete the guiding instructions in *italic font*.**

Call deadlines are final and will be strictly enforced. The electronic system will not allow submissions after call deadlines! Please consider that the online data entry may be overloaded by the day of the deadline. It is therefore recommended to upload all the required material well beforehand. For further information, please contact the NEURON Joint Call Secretariat (JCS):

**Silvia Lorrio**

Agencia Estatal de Investigación (AEI)

E-Mail: [neuron@aei.gob.es](mailto:neuron@aei.gob.es)

1. **Checklist for the Coordinator**

*In order to make sure that your proposal will be eligible for this call, please collect the information required to tick all the sections below before starting to complete this application form.*

**General condition:**

As coordinator and on behalf of the PIs of ***<acronym>*** proposal, I give my consent to ERA-NET NEURON to disclose information included in this proposal related to the objective of the project to interested patient organisations in order to promote further collaborations and obtain feedback.

The content of the proposal has not been submitted elsewhere (double funding is not allowed!).

**The composition of the consortium:**

The project proposal involves at least 3 eligible project partners from at least 3 different countries participating in the call.

The project proposal involves a maximum of 5 research partners (requesting funding as well as participating with own contribution), up to 6 if at least one of the underrepresented countries listed in the Call Text is included.

The project proposal does not include more than 2 partners from the same country participating in the call.

The coordinator and the partners in the consortium requesting budget are eligible for funding. **Please check the eligibility of each partner institution with the respective funding agencies before submission.**

The consortium includes an early career researcher (ECR) according to the criteria described in the call text.

*Please note that inclusion of an ECR is not mandatory although considered in the evaluation**. If you need to justify an extension (parental leave, sick leave etc…) please add a brief description in the CV of the respective partner, no formal justification is required at this step**. If in doubt, please contact the JCS and the respective funding agency.*

**Eligibility of consortium partners:**

**I have made sure** that all partners involved in the project proposal have **checked their eligibility** to receive funding by its funding agency (see funder-specific information here: <https://www.neuron-eranet.eu/wp-content/uploads/NEURON_JTC2024_All_national_regulations.pdf>).

**Annexes:**

**I verified** that the general information and the budget in this pre-proposal are identical to the information entered in the submission platform. In case of inconsistency between the information registered in the electronic submission tool and the information included in the PDF of this application form, the **information entered in the submission tool shall prevail.**

***Please note:***

* **Some funding agencies require extra procedures such as parallel-submission. Please check the funder-specific regulations.**
* Proposals that **do not meet the national eligibility criteria and requirements may be declined without further review.**
* Please **use the template** and do not remove the margins, titles, headers, logo, etc. Blank pages are not allowed.
* All fields must be completed using **DIN-A4; font: Arial, 10pt; single-spaced, page limits also for references.** Incomplete proposals, proposals using a different format or exceeding length limitations of any section **may be rejected without further review**.
* **Do not exceed the total of 6 pages including figures and references.**
* Once completed, the pre-proposal must be converted to a **single PDF document** before being uploaded to the submission website.

# Pre-Proposal Application Form

**1. Acronym (7-10 characters):**

**2. Project Title:**

**3. Project Coordinator:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Institution/Department |  | | |
| Position |  | | |
| Address |  | | |
| Country |  | | |
| Phone |  | | |
| Email |  | | |
| ORCID Number |  | ECR1 (yes or no) |  |

1 Early Career Researcher

**4. Partners:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Country | Name of the group leader | Institution, position and full affiliations (e.g. address, phone, e-mail, ORCID number) | ECR (yes or no) |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6[[1]](#footnote-2)\* |  |  |  |  |

**5. Total funding applied for:** €

**6. Have you applied to other funding schemes or ERA-NETs with a similar proposal?**

yes / no

If yes, please specify:

**7.** **Summary of the project** (max. 6 pages): *Description of the work-plan including the objectives, the rationale, the methodology highlighting the novelty, originality and feasibility as well as the added value of the collaboration, diagrams, figures, list of references (First author et al., Title, Journal, Year and DOI link).*

**8. Brief CV for each group leader** *(only one CV per consortium partner, max. 1 page each):* *including*

* *a list of up to five relevant publications within the last five years, which demonstrates the competence to carry out the project,*
* *the description of patents, and*
* *the ongoing projects related to the present topic,* *indicating funding sources and possible overlaps with the pre-proposal.*

*The year of the doctoral dissertation (or equivalent, medical degree, medical specialisation) has to be clearly stated in the CV.*

***Early career researchers are asked to provide a brief written justification if an extension above 7 years after the PhD dissertation is relevant (see call text).***

***NOTE***: **Further annexes are not allowed. Any annex will be removed before the peer review.**

**It is absolutely mandatory to submit the proposal electronically (as pdf) in the submission system (**[**https://ptoutline.eu/app/neuron\_bb**](https://ptoutline.eu/app/neuron_bb)**), to meet the deadline for submission, and carefully follow the format of the pre-proposal structure (DIN-A4; font: Arial, 10pt; page limits). Proposals not meeting the formal criteria can be rejected without further review.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **ERA-NET NEURON Call 2024** | | | | | |  | | |  | | |  | |  | |  |
|  | Pre-proposal: Budget plan of the project | | | | | |  | | |  | | |  | |  | |  |
|  |  | | | | | |  | | |  | | |  | |  | |  |
|  | **Project Acronym:** | | | | | | | | | | | | | |  | |  |
|  |  | Coordinator | | Partner 2 | | Partner 3 | | | Partner 4 | | | Partner 5 | | Partner 6**\*** | |  | |
|  | **Name (group leader)** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Institution** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Country** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Funding organisation** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **PROJECT COSTS (€)** |  | |  | |  | | |  | | |  | |  | | **Total** | |
|  | **Personnel €** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Consumables €** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Equipment €** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Travel €1** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Subcontracting €** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Other direct costs €2** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Overheads €3** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Total budget €4** |  | |  | |  | | |  | | |  | |  | |  | |
|  | **Requested budget €4,5** |  | |  | |  | | |  | | |  | |  | |  | |
|  |  |  |  | |  | | |  | | |  | | | |  | |  |
|  | **We strongly recommend checking the national call texts and consulting with the national/regional contact points (see next page).**  **1 When planning the travel costs, please consider that coordinators and PIs shall present the projects at a midterm symposium taking place during a NEURON conference (cf. call text).**  **2 E.g. provisions, licensing fees; may not be eligible costs in all countries (will be handled according to national regulations).**  **3 Overhead costs: funding according to national regulations.**  4 **Those countries whose currency is different than €, shall include their national currency in brackets.**  **5 PIs from countries using full cost model shall give here the proportion of their total budget requested from the funding organization; in case a research group participates by own contribution they should indicate “0”.** | | | | | | | | | | | | | | | | |

**Confirmation**

*to be completed by the coordinator*

As Coordinator, I have contacted all the consortium partners listed above and referred them to their national/regional contact points (as listed in the NEURON Call Text) to consult on the national eligibility rules and funding regulations of the respective funding organization. I furthermore certify that all consortium partners listed above agree to their participation in this consortium and are aware of the content of this proposal.

Project Coordinator signature (digital signature suffices): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **\*The total number of research groups in a consortium is limited to 5. Only consortia including partners from** **Croatia, Hungary, Latvia, Lithuania, Romania, Slovakia, Taiwan and/or Turkey may increase the total number of partners to 6. For further regulations concerning the composition of the consortia please refer to the call text.** [↑](#footnote-ref-2)