Please return to [partnering@humanbrainproject.eu](mailto:partnering@humanbrainproject.eu) an application in this format: Proposal for becoming Partnering Project followed by Annex 1: application for becoming Associated Member of all organisations in the consortium applying to become an AM

**Proposal**

**for becoming Partnering Project of the Human Brain Project (HBP) Flagship**

The application (sections I-VI) shall consist of maximum four A4 pages.

The following information needs to be completed by the Project Leader / Coordinator and submitted with annex 1, *Application for becoming Associated Member of the HBP Flagship*, to partnering@humanbrainproject.eu*.* All fields are mandatory. All documents have to be submitted in word format.

|  |  |
| --- | --- |
| **I. Information on the candidate project** | |
| Title |  |
| Acronym |  |
| Source of funding *(FLAG-ERA, EC, national, regional, private, other)*  *In case of a funding by an EU or national/regional funding agency, please indicate the name of the responsible project officer.* |  |
| Funding organisation(s) |  |
| Total amount of funding (€) |  |
| Duration  *(MM/YYYY - MM/YYYY)* |  |
| Duration (in months) |  |
| **II. Project leader/coordinator contact information** | |
| First and last name |  |
| Email |  |
| Affiliation (Organisation/ Institute, Laboratory, Department, etc.) |  |
| Country |  |
| **Ethics Rapporteur**  Note: Associated Members of a PP need to comply with the Ethics Compliance and other Ethics Management processes of the HBP as described on the [Ethics Management website](https://www.humanbrainproject.eu/de/ethics-management). This includes the nomination of an Ethics Rapporteur, responding to the ethics compliance survey and, where applicable, the submission of any ethics approvals and related documents. | |
| First and last name |  |
| Email |  |
| Affiliation (Organisation/ Institute, Laboratory, Department, etc.) |  |
| Country |  |
| **III. Candidate project’s description and objectives relevant to the HBP Flagship, and motivation for joining the HBP Flagship as a Partnering Project**  *(Please state if the entire project or only parts of it are relevant to the HBP Flagship). This abstract* | |
|  | |
| **IV. Complementarities and synergies between the candidate project and the HBP Flagship Core Project** | |
| **V. How will the candidate project facilitate alignment and information flow with the** **HBP Flagship Core Project?** | |
| **VI. HBP Flagship Core Project Subproject(s) where the candidate project would like to see its activities integrated and foreseen interactions between the candidate project and the** **HBP Flagship Core Project Subproject(s)** | |
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| **VII. List of all institutions involved in the project. Please tick the appropriate box:**   1. **Applies to become new Associated Member** 2. **Existing Core Project partner** 3. **Existing Associated Member**   *Please select only one option. Note that, if one institution is already partner of the Core Project or an Associated Member, then it cannot become a new Associated Member.* | | | |
| Organisation 1 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| --- | --- | --- | --- |
| Organisation 2 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| --- | --- | --- | --- |
| Organisation 3 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Email |  | | |
| Phone |  | | |

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| --- | --- | --- | --- |
| Organisation 4 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| Organisation 5 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |