

NCCR Application Form

New Individual Project

Title of the NCCR:

Title of the Individual Project:

Head of the Individual Project (Name, Professional address):

Allocations for the current contract period (in CHF)

SNSF funding:

Self funding:

Third party funding:

Does the new project require to supplement the objectives in the NCCR Agreement?

(if yes, please add the supplementary text as an annexe)

Abstract of the project (please enclose to this form the complete project description):

Date/place:

Signature of the NCCR Director:

Proposition by the Chairman of the Review Panel to the Research Council, Section NCCR:

Date/place:

Signature of the Chairman: