|  |  |
| --- | --- |
| No. |  |
| Reviewer |  |
| Co-reviewer |  |

Sekretariat: Postfach 870, 1001 Lausanne,

Tel. 021 321 29 69, Fax 021 321 29 40

[www.alcoholresearch.ch](http://www.alcoholresearch.ch), email: info@alcoholresearch.ch

Proposal form

# Part 1: General Information

## Basic Data

|  |  |
| --- | --- |
| **Funding requested for** | Sponsoring of university graduates for the promotion of young scientists |
| **Type of proposal** | [ ]  New proposal | [ ]  Follow-on proposal No. |
| **Continuation foreseen** | [ ]  yes | [ ]  no |
| **Project title in English** |  |
| **Research field(s)** | [ ]  Human sciences[ ]  Social sciences | [ ]  Life sciences[ ]  Medical sciences |
| **Amount requested CHF** |  |
| **Starting date** |  |
| **Duration** |  |
| **Institution(s)** |  |
| **Main applicant**Surname, first nameAcademic degreeInstitution |  |
| **Attachments** | [ ]  Curriculum vitae of applicants | Total items: |
| [ ]  List of publications by applicants | Total items: |
| [ ]  List of experts | Total items: |
| [ ]  Publications | Total items: |
| [ ]  Offers | Total items: |
| [ ]  | Total items: |
| [ ]  | Total items: |
| [ ]  | Total items: |

**The main applicant confirms hereby the veracity of all details given in both parts of this proposal including the attachments. They were prepared in agreement with the persons involved.**

**Place, date: Signature:**

# Applicants’ personal data

## Main Applicant

|  |  |
| --- | --- |
| Surname, first name |  |
| Academic degree |  |
| Position |  |
| Date of birth |  |
| Nationality |  |
| Gender | [ ]  male | [ ]  female |
| Social security number (AHV) |  |
| **Institution**Street, NrPC, CityDirect lineOffice phoneFaxEmail |  |

# Part 2: Scientific Information

## Thematic orientation and scientific networks

|  |  |
| --- | --- |
| **Discipline(s)** |  |
| **Keywords** |  |
| **Word account of the research plan (excluding summary)** |  |
| **International collaboration** | [ ]  yes | [ ]  no |
| If yes, with which persons/ groups/ institutions/ countries? |  |
| In which context? |  |
| **National collaboration** | [ ]  yes | [ ]  no |
| If yes, with which persons/ groups/ institutions? |  |
| In which context? |  |

**Please include the following documents:**

## Summary (one page)

## Training plan (2,500 words, excluding tables, figures and references)

### State of applicant's research training

### Detailed training plan, aims and expected acquired skills

### Timetable and milestones

3.3.4. Significance of the acquired skills for alcohol research

# Part 3: Budget

## Other sources of support

Have you requested other sources of support for this project? What for (i.e., consumables, salaries,) did you have requested financial support and how much did you received?

Do you intend to apply to other organizations for funding?

|  |
| --- |
|  |

## Requested funding (from the SSA)

|  |
| --- |
| **4.2.1 Costs of the training program** |
|  |  |
|  |  |
|  |  |
| **4.2.2 Miscellaneous** |
|  |  |
|  |  |
|  |  |
| **4.2.3 Salaries**The name (if possible), first name (if possible), function (for example, senior researcher, doctoral student, technician), occupation rate (or number of hours), and the beginning and end of the contract have to be mentionned for each co-worker. |
| 1. |  |
| 2. |  |
| 3. |  |
| **4.2.4 Social security**Social security has to be specified for each co-worker. |
| 1. |  |
| 2. |  |
| 3. |  |
| **Total (CHF)** |  |