

MODELLO DI  
PRESENTAZIONE  
PROGETTO  
COMPLETO



Ministero della Salute

Direzione Generale della Ricerca e Innovazione in Sanità  
BANDO <anno> PROGETTO COMPLETO

Project Title: (Max 750 caratteri)

Project Code:

Principal Investigator/Coordinator:

Project Type :

Applicant Institution:

Project Section: GR Ordinary  RF Ordinary  PE-Italian Research Abroad  CO-Industrial Co-financing

Network Project(\$): OVERALL PROJECT  WP PROJECT  WP PROJECT CODE:.....

Project Classification IRG:

Project Classification SS:

Project Keyword 1:

Project Keyword 2:

Project Keyword 3:

Project Request: Animals: Y/N

Humans: Y/N

Clinical trial: Y/N

The object/s of this application is/are under patent copyright Y/N:

In case of positive reply please report patent number and owner and attach copy of the patent certificate:

Patent Number:

Type Patent Owner (Public Inst./Company/Private).....

Patent owner: ..... Attached Patent/Copyright Certification Letter (Y/N)....

**OPERATIVE UNITS /WP(\*)** For Projects Code RF, GR, PE and CO only line 1,2,3 can be reported

INSTITUTION	Department/Division/Laboratory	Role in the Project
1		
2		
3		
4		
5		
6		
7		
8		

(\*) Line 4, 5, 6, 7, 8 are only for Network Programme

**RESEARCH COLLABORATORS - Investigators, Institution, and Role in the Project**

(NO OVERALL PROJECTS NETWORK PROGRAMME) (Please be brief. Do not include contact information or lengthy description of role delineation).

Key Personnel	Institution/Organization/Position	Role in the Project	CoPI (Y/N)
1			
2			
3			
4			

**ONLY GR - Attached File Institution Declaration (Call Point 1.2.K) (Y/N):**

**ONLY PROJECT INDUSTRIAL COFINANCING (CODE CO)**

**INDUSTRIAL/MANUFACTURER COFINANCING**

Industry/Manufacturer:

Address:

City-State and Country:

Amount of Cash Co-financing:

Contact Person: Name:

Email:

Phone:

**ONLY PROJECT ITALIAN RESEARCHER ABROAD (CODE PE)**

**Italian Researcher Abroad – Foreign Operative Unit**

Name and Surname

Foreign Institution

Department/Division/Laboratory

City-State and Country

Years of Residence Abroad

Email:

Phone:

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti



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**C.1. Overall Summary** (max 1.000 characters):

**C2 Background / State of the Art** (max 1.500 characters):



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**Hypotesis and Specific AIMS** (max 12.000 characters - max 4.000 characters for single field)

D.1.1: Hypothesis and Significance

D.1.2 Preliminary data :

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D.2: Specific Aims

D2.1 Specific Aims 1:

D2.2 Specific Aims 2:

D.2.3 Specific Aims 3:

D3.1: Experimental Design Aim 1:

 <p><i>Ministero della Salute</i>  Direzione Generale della Ricerca e Innovazione in Sanità  BANDO &lt;anno&gt; PROGETTO COMPLETO</p>	Project Title: (Max 750 caratteri)
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Network Project(\$): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

D.3.2 Experimental Design Aim 2 :

D.3.3 Experimental Design Aim 3 :

D.4 Picture to support preliminary data (max 3 MB):

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D.5 Methodologies and statistical analyses

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D.6 Expected outcomes:

D.7 Risk Analysis, possible problems and solutions

**E Significance and Innovation** (max 1.000 characters)

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**F DESCRIPTION OF THE COMPLEMENTARITY AND SINERGY OF RESEARCH TEAM (max 1.500 characters):**

**G TRAINING AND TUTORIAL ACTIVITIES (max 1.000 characters):**

**H Bibliography (max 2.000 characters):**

**K: Timeline/Deliverables/Payable Milestones (max 1.000 characters)**

**K1.1 Milestones - 18 month: (max 500 characters)**

**K.1.2 Milestones - 36 month: (max 500 characters)**

**K.2 GANTT CHART File Attached (max 3 MB):**

(§) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti



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**I: EQUIPMENT AND RESOURCES AVAILABLE:** (max 2500 characters):

I.1 Facilities Available

I.2 Subcontract (Explain Reasons for Subcontract)

**L: TRANSLATIONAL RELEVANCE AND IMPACT FOR THE NATIONAL HEALTH SYSTEM (SSN)** (max 1.000 characters):

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Provide the following information for PI person..

**A. PRINCIPAL INVESTIGATOR PROFILE**

NAME	SURNAME	BIRTH DATE

**AFFILIATION**

INSTITUTION	DEPARTMENT/UNIT	POSITION TITLE

**EDUCATION AND TRAINING (Max 6 Lines)**

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY

**A.A Personal Statement (MAX 600 Char)** Briefly indicate the overall goals of the project and responsibilities of the key person identified on the Biographical Sketch.

Empty box for personal statement.

**A.B Positions and Honors.**

**A.B.1 POSITIONS** List in chronological order the previous positions, concluding with your present position. List any honors. (Max 10 lines)

<u>INSTITUTIONS</u>	<u>DIVISION/RESEARCHH GROUP</u>	<u>LOCATION</u>	<u>POSITION</u>	<u>FROM YEAR</u>	<u>TO YEAR</u>

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti



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Applicant Institution:

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Network Project(\$): OVERALL PROJECT  WP PROJECT  WP PROJECT CODE:.....

**A.B.2 Grant, Awards and Honors**

A.B.2.1: Official H Index (Scopus or Web of Science): .....(Please report in the follow table H-index Source and related code)

Source:	Scopus Author Id:	ORCID Author Code:	RESEARCHID Author Code:
---------	-------------------	--------------------	-------------------------


**A.C. Selected peer-reviewed publications of the PI**

**VALID FOR PI MINIMUM EXPERTISE LEVEL.**

best publications on the same topic of the project proposal with bibliographic data, IF, N° of Citations until the date of the Proposal Project  
Do not include manuscripts submitted or in preparation.

Title	Publication	Pag	Vol	Year	DOI	PMID	IF	Citation	POSITION F=First L=Last C=Corrispo ndent

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti

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	Principal Investigator/Coordinator:
Project Code:	Applicant Institution:
Project Type :	
Project Section: GR Ordinary <input type="checkbox"/> RF Ordinary <input type="checkbox"/> PE-Italian Research Abroad <input type="checkbox"/> CO-Industrial Co-financing <input type="checkbox"/>	
Network Project(s): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

A.B.2.2 Grant (please download certification letter related to the Grant in case this information on grant and researcher funded isn't available on Funder official website):

GRANT FUNDED INSTITUTION/COUNTRY	YEAR	GRANT TITLE	POSITION IN PROJECTS (Coordinator/ Collaborator)	FUND GRANT (euros)	Source WebSite Grant Listed	Attached Certification Letter (Y/N)


A.B.2.3 Other Awards and Honor (Max 600 char)

A.B.2.4 Other CV Information (Max 600 char):

**A.C. Selected peer-reviewed publications of the PI (In chronological order) FOR THE EVALUATION CV.**  
 max 10 best publications on the same topic of the project proposal with bibliographic data, IF, N° of Citations until the date of the Proposal Project Do not include manuscripts submitted or in preparation.

Title	Publication	Pag	Vol	Year	DOI	PMID	IF	Citation

(§) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti

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	Principal Investigator/Coordinator:
Project Code:	Applicant Institution:
Project Type :	Project Section: GR Ordinary <input type="checkbox"/> RF Ordinary <input type="checkbox"/> PE-Italian Research Abroad <input type="checkbox"/> CO-Industrial Co-financing <input type="checkbox"/>
Network Project(\$): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

Provide the following information for the key personnel and other four significant contributors DO NOT EXCEED HALF PAGE for each person.

**B.1 –RESEARCH COLLABORATOR N.1 BIOGRAPHICAL SKETCH CONTRIBUTORS –**

NAME	SURNAME	BIRTH DATE

**AFFILIATION**

INSTITUTION	DEPARTMENT/UNIT	POSITION TITLE

**BEST EDUCATION AND TRAINING (Max 5 Lines)**

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY

**B1.A Personal Statement** Briefly indicate the overall goals of the project and responsibilities of the key person identified on the Biographical Sketch. (Max 600 Char)

**B1.B Positions and Honors.**

**B1.B.1 POSITIONS** List in chronological order the last 3 previous positions, concluding with your present position. List the best 5 Position

INSTITUTIONS	DIVISION/RESEARCHH GROUP	LOCATION	POSITION	FROM YEAR	TO YEAR

**B1.B.2 Awards and Honors**

B1.B.2.1: Official H Index (Scopus or Web of Science): .....(Please report in the follow table H-Index Source and related code)

Source:	Scopus Author Id:	ORCID Author Code:	RESEARCHID Author Code:
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B1.B.2.2 Awards and Honors (Max 500 char):

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti



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Project Title: (Max 750 caratteri)

Project Code: Principal Investigator/Coordinator:

Project Type: Applicant Institution:

Project Section: GR Ordinary  RF Ordinary  PE-Italian Research Abroad  CO-Industrial Co-financing   
 Network Project(§): OVERALL PROJECT  WP PROJECT  WP PROJECT CODE:.....

**B.2 - RESEARCH COLLABORATOR N.2 BIOGRAPHICAL SKETCH CONTRIBUTORS -**

NAME	SURNAME	BIRTH DATE

**AFFILIATION**

INSTITUTION	DEPARTMENT/UNIT	POSITION TITLE

**BEST EDUCATION AND TRAINING (Max 5 Lines)**

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY

**B2.A Personal Statement** Briefly indicate the overall goals of the project and responsibilities of the key person identified on the Biographical Sketch. (Max 600 Char)

**B2.B Positions and Honors.**

**B2.B.1 POSITIONS** List in chronological order the last 3 previous positions, concluding with your present position. List the best 5 Position

INSTITUTIONS	DIVISION/RESEARCHH GROUP	LOCATION	POSITION	FROM YEAR	TO YEAR


**B2.B.2 Awards and Honors**

B2.B.2.1: Official H Index (Scopus or Web of Science): .....(Please report in the follow table H-Index Source and related code)

Source: Scopus Author Id: ORCID Author Code: RESEARCHID Author Code:

B2.B.2.2 Awards and Honors ((Max 600 Char)):

(§) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti

 <b>Ministero della Salute</b> Direzione Generale della Ricerca e Innovazione in Sanità <b>BANDO &lt;anno&gt; PROGETTO COMPLETO</b>	<b>Project Title:</b> (Max 750 caratteri)
	<b>Principal Investigator/Coordinator:</b>
<b>Project Code:</b>	<b>Applicant Institution:</b>
<b>Project Type :</b>	
<b>Project Section:</b> GR Ordinary <input type="checkbox"/> RF Ordinary <input type="checkbox"/> PE-Italian Research Abroad <input type="checkbox"/> CO-Industrial Co-financing <input type="checkbox"/> <b>Network Project(§):</b> OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

**B.3 - RESEARCH COLLABORATOR N.3 BIOGRAPHICAL SKETCH CONTRIBUTORS -**

NAME	SURNAME	BIRTH DATE

**AFFILIATION**

INSTITUTION	DEPARTMENT/UNIT	POSITION TITLE

**BEST EDUCATION AND TRAINING (Max 5 Lines)**

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY

**B3.A Personal Statement** Briefly indicate the overall goals of the project and responsibilities of the key person identified on the Biographical Sketch. (Max 600 Char)

**B3.B Positions and Honors.**

**B3.B.1 POSITIONS** List in chronological order the last 3 previous positions, concluding with your present position. List the best 5 Position

INSTITUTIONS	DIVISION/RESEARCHH GROUP	LOCATION	POSITION	FROM YEAR	TO YEAR

**B3.B.2 Awards and Honors**


**B3.B.2.1:** Official H Index (Scopus or Web of Science): .....(Please report in the follow table H-Index Source and related code)

Source:	Scopus Author Id:	ORCID Author Code:	RESEARCHID Author Code:
---------	-------------------	--------------------	-------------------------

**B3.B.2.2 Awards and Honors** (Max 600 Char)

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Network Project (§): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/>	WP PROJECT CODE:.....

**B.4 - RESEARCH COLLABORATOR N.1 BIOGRAPHICAL SKETCH CONTRIBUTORS -**

NAME	SURNAME	BIRTH DATE

**AFFILIATION**

INSTITUTION	DEPARTMENT/UNIT	POSITION TITLE

**BEST EDUCATION AND TRAINING (Max 5 Lines)**

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY

**B4.A Personal Statement** Briefly indicate the overall goals of the project and responsibilities of the key person identified on the Biographical Sketch. (Max 600 Char)

**B4.B Positions and Honors.**

**B4.B.1 POSITIONS** List in chronological order the last 3 previous positions, concluding with your present position. List the best 5 Position

INSTITUTIONS	DIVISION/RESEARCHH GROUP	LOCATION	POSITION	FROM YEAR	TO YEAR


**B4.B.2 Awards and Honors**

B4.B.2.1: Official H Index (Scopus or Web of Science): .....(Please report in the follow table H-Index Source and related code)

Source:	Scopus Author Id:	ORCID Author Code:	RESEARCHID Author Code:
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B4.B.2.2 Awards and Honors (Max 600 Char)

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Network Project(\$): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

### B5 EXPERTISE RESEARCH COLLABORATORS

B.5.1 Grant: (please download certification letter related to the Grant in case this information on grant and researcher funded isn't available on Funder official website)

GRANT FUNDED INSTITUTION/COUNTRY	YEAR	GRANT TITLE	POSITION IN PROJECTS (Coordinator/ Collaborator)	FUND GRANT (euros)	Collaborator Name	Source WebSite Grant Listed	Attached Certification Letter (Y/N)

B5.2. Selected peer-reviewed publications of the Research Group/ Collaborators (in chronological order). max 10 best publications on the same topic of the project proposal with bibliographic data, IF, N° of Citations until the date of the Proposal Project Do not include manuscripts submitted or in preparation.

Collaborator Name	Title	Publication	Pag	Vol	Year	DOI	PMID	IF	Citation

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**I – TOTAL PROPOSED BUDGET**

COSTS	Budget Year 1	Budget Year 2	Budget Year 3	TOTAL BUDGET	CO-FUNDING (**)	PROJECT COSTS PROPOSED FOR FUNDING TO THE MOH
1 Staff' Salary				€ -	€	
2 Researchers' Contracts				€ -	€	€ -
3a. Equipment (Leasing-Rent)				€ -	€	€ -
3b. Supplies				€ -	€	€ -
3c. Model Costs				€ -	€	€ -
4. Subcontracts				€ -	€	€ -
5 Patient costs				€ -	€	€ -
6. IT Services and Data Bases				€ -	€	€ -
7. Travels				€ -	€	€ -
8. Publication Costs				€ -	€	€ -
9 Training and Dissemination				€ -	€	€ -
10. Overheads				€ -	€	€ -
11. Coordination Costs				€ -	€ -	€ -
<b>TOTAL</b>				€ -	€	€ -

(\*\*) Report the Co-Funding Contributor/s:

**GLOBAL COSTS PROJECT - BUDGET JUSTIFICATION**

1 Staff' Salary
2 Researchers' Contracts
3a. Equipment (Leasing-Rent)
3b. Supplies
3c. Model Costs
4. Subcontracts
5 Patient costs
6. IT Services and Data Bases
7. Travels
8. Publication Costs
9. Training and Dissemination
10. Coordination Costs

(§) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti



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**PROPOSED BUDGET DISTRIBUTION (ONLY FOR PROJECT RF, GR, PE, CO - Call sections A and B)**

COSTS	UNIT 1		UNIT 2		UNIT 3	
	TOTAL BUDGET	UNIT1 COSTS MOH FUNDING	TOTAL BUDGET	UNIT2 COSTS MOH FUNDING	TOTAL BUDGET	UNIT3 COSTS MOH FUNDING
1 Staff' Salary	€ -	NOT PROVIDED	€	NOT PROVIDED	€	NOT PROVIDED
2 Researchers' Contracts	€ -	€ -	€ -	€ -	€ -	€ -
3a. Equipment (Leasing-Rent)	€ -	€ -	€ -	€ -	€ -	€ -
3b. Supplies	€ -	€ -	€ -	€ -	€ -	€ -
3c. Model Costs	€ -	€ -	€ -	€ -	€ -	€ -
4. Subcontracts	€ -	€ -	€ -	€ -	€ -	€ -
5 Patient costs	€ -	€ -	€ -	€ -	€ -	€ -
6. IT Services and Data Bases	€ -	€ -	€ -	€ -	€ -	€ -
7. Travels	€ -	€ -	€ -	€ -	€ -	€ -
8. Publication Costs	€ -	€ -	€ -	€ -	€ -	€ -
9 Training and Dissemination						
10. Overheads	€ -	€ -	€ -	€ -	€ -	€ -
11. Coordination Costs	€ -	€ -	NOT PROVIDED	NOT PROVIDED	NOT PROVIDED	NOT PROVIDED
<b>Total</b>	€ -	€ -				

(§) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti

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Network Project(\$): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

**PROPOSED TOTAL BUDGET ONLY FOR NETWORK PROGRAMME (Call sections C)**


COSTS	TOTAL BUDGET	CO-FUNDING (**)	PROJECT COSTS PROPOSED TO FUNDING ORGANIZATION (NO MOH REQUEST)	PROJECT COSTS PROPOSED FOR FUNDING TO THE MOH
1 Staff' Salary	€ -	€	€ -	€ -
2 Researchers' Contracts	€ -	€	€ -	€ -
3a. Equipment (Leasing-Rent)	€ -	€	€ -	€ -
3b. Supplies	€ -	€	€ -	€ -
3c. Model Costs	€ -	€	€ -	€ -
4. Subcontracts	€ -	€	€ -	€ -
5 Patient costs	€ -	€	€ -	€ -
6. IT Services and Data Bases	€ -	€	€ -	€ -
7. Travels	€ -	€	€ -	€ -
8. Publication Costs	€ -	€	€ -	€ -
9 Training and Dissemination	€ -	€	€ -	€ -
10. Overheads	€ -	€	€ -	€ -
11. Coordination Costs	€ -	€ -	€ -	€ -
<b>TOTAL</b>	€ -	€	€ -	€ -

(\*\*) REPORT INFORMATION ON ADDITIONAL CO-FUNDING:

**BUDGET JUSTIFICATION**

1 Staff' Salary
2 Researchers' Contracts
3a. Equipment (Leasing-Rent)
3b. Supplies
3c. Model Costs
4. Subcontracts
5 Patient costs
6. IT Services and Data Bases
7. Travels
8. Publication Costs
9. Training and Dissemination
10. Coordination Costs

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti

 <b>Ministero della Salute</b> Direzione Generale della Ricerca e Innovazione in Sanità <b>BANDO &lt;anno&gt; PROGETTO COMPLETO</b>	Project Title: (Max 750 caratteri)
	Principal Investigator/Coordinator:
Project Code:	Applicant Institution:
Project Type :	Project Section: GR Ordinary <input type="checkbox"/> RF Ordinary <input type="checkbox"/> PE-Italian Research Abroad <input type="checkbox"/> CO-Industrial Co-financing <input type="checkbox"/>
Network Project(\$): OVERALL PROJECT <input type="checkbox"/> WP PROJECT <input type="checkbox"/> WP PROJECT CODE:.....	

**ONLY FOR NETWORK PROGRAMME OVERAL PROJECT**

WP	RESEARCH INSTITUTION	FUNDING INSTITUTION	TOTAL PROGRAMME COSTS	CO-FUNDING (**)	PROJECT COSTS PROPOSED TO FUNDING ORGANIZATION)	PROJECT COSTS PROPOSED FOR FUNDING TO THE MOH
WP1				€	€ -	€ -
WP2				€	€ -	€ -
WP3				€	€ -	€ -
WP4				€	€ -	€ -
WP5				€	€ -	€ -
WP6				€	€ -	€ -
WP7				€	€ -	€ -
WP8				€	€ -	€ -
TOTAL				€	€ -	€ -

(\$) Per i Progetti di Rete deve essere compilato un allegato progetto completo per l'insieme del progetto di rete ed un allegato per ognuno dei Working Packages previsti