



Summary

Reference number	
Institution	
Lead Applicant	
Collaborators	
Total Requested	

Sample Application

General Information

Project Title	
Project Duration (months)	
Type of Applicant	
Type of Application	

Title
Forename(s)
Surname
Date of Birth
Gender

Email Address
Telephone No.
Address Line 1
City/Town
Postcode

Sample Application

Overview

Abstract

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MeSH Terms

MeSH Terms

Mesh1

Added value and unmet need

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Lay Summary - English

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Project Title - Italian

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Lay Summary - Italian

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Type of Research

Disease name	
Disease code	
Disease OMIM number	
Research Type	
Research Step	

Sample Application

Background and Rationale

Background - Rationale - Objectives

Preliminary Results

If available

Background on Intellectual Property

(Preliminary Results Figures - xxxx.pdf) is included as an appendix with this S/G.

Research Plan

Specific Aims and Experimental Plan

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Expected Outcomes and Future Development

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(Gantt Chart -xxxx.pdf) is included as an appendix within this file.

(Experimental Plan Figures -xx.pdf) is included as an appendix within this file.

Sample Application

Cited Literature

Sample Application

Host Institution and Overall Information

Institution	
Department	
Administrative contact name(s) and email(s)	
City	
CAP / Zip Code	
Region	
Province	
Country	

(Host Institution Agreement - Telethon Rare Diseases and COVID-19 Special Grant - Host Institution Agreement.pdf) is included as an appendix within this file.

APPLICANT

Permanent position	
Position Title	
Main research fields	
Name of the Laboratory	
Number of staff members	
Are you Head of the Laboratory?	
Head of the Laboratory <i>Please indicate name and email address</i>	

(Independence Statement - xxx.pdf) is included as an appendix within this file.

Any other appointment (including foreign)?	
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FACILITIES AND RESOURCES

Laboratory space	
Clinical resources	
Office space	
Major equipment	
Core Facilities and Services	
Other	

HUMAN SUBJECTS

Be aware that the relevant approval docs must be provided for grant activation.

Indicate whether the study involves:	
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VERTEBRATE ANIMALS

Be aware that the relevant approval docs must be provided for grant activation.

Does your proposal involve vertebrate animals?	
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Collaborations

Sample Application

Budget

Budget

	Year 1	Total

Overhead %	
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Totals	
	Total
Overhead	
Budget	
Total	

Sample Application

Other Financial Support

Sample Application

Personal Data and CV

Education / Training

From	To	Qualification	Subject	Country	Institution	Class	Department / School / Division

Positions

From	To	Position	Organisation

Personal Statement

Date	Details

Additional Info

Financial interests disclosure

Codice Fiscale / Tax Code	
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ID Researcher Platform	
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Personal author ID	
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Publications relevant to this proposal

Publications

Declaration

Declaration

- I hereby certify that all information submitted in the online application form is accurate and complete.
- If I am awarded funding from the Fondazione Telethon for this project, I will accept the conditions set by the Fondazione Telethon.

Full Name	
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Place/Date	
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Sample Application

Appendices

- 1) Preliminary Results Figures -
- 2) Gantt Chart -
- 3) Experimental Plan Figures -
- 4) Host Institution Agreement -
- 5) Indipendence Statement -

Sample Application

1) Preliminary Results Figures - if any

Sample Application

2) Gantt Chart-

Sample Application

3) Experimental Plan Figures - if any

Sample Application

4) Host Institution Agreement-

FONDAZIONE



Applicant Name: _____

ACCEPTANCE OF APPLICATION BY THE HOST INSTITUTION

I, Dr./Prof. _____, on behalf of the

(name of the Director of the Institute or other Responsible official)

Host Institution _____

(name of the Institution)

Department or equivalent _____

(name of the Department)

declare that I have read the research application submitted on-line to Telethon

by Dr./Prof. _____ Lead Applicant of the project titled

(name of the Applicant)

and that it is complete and correct.

I also declare that the Host Institution will provide the necessary facilities and personnel to carry out the above research project.

If the Applicant is not holder of a permanent position, I am aware that the salary of the Investigator cannot be requested within the Application as part of the Telethon Rare Diseases and COVID-19 Special Grant and that it needs to be provided through other means.

Incompatible - I acknowledge that the above-mentioned Investigator also holds a foreign appointment at _____ and I declare that such appointment does not conflict with the time commitment indicated by the Investigator within the Telethon Application for an effective conduct of the proposed research project.

I declare that the Principal Investigator is authorized to submit the Application on the Host Institution's behalf. By signing the present Agreement (which will be uploaded within the Application), I declare that the Host Institution undertakes to respect any and all conditions under the Call for Application and discharges Telethon from any liability related to any breach of said conditions by the Applicant and/or by the Host Institution itself.

I declare that I have provided the Applicant and any researcher involved in the Application (Key Personnel or Collaborator) with the information attached to the *thecal for Application* in Appendix 1. I also declare that the relevant consents have been gathered in order to be authorized to indicate the personal data of the Applicant and any other researcher in the Application.

I declare that I am aware that Fondazione Telethon can, at any time, request the above-mentioned documents (Information to data subjects and declaration of consent) and that the Host Institution shall deliver any relevant document, according to Fondazione Telethon's request.

Dr./Prof. _____

(Name of the Director of the Institute or other Responsible official)

Position _____

Signature _____

Place and date _____

Sample Application

5) Indipendence Statement - if applicable

Sample Application