



**Summary**

<b>Reference number</b>	
<b>Institution</b>	
<b>Lead Applicant</b>	
<b>Collaborators</b>	
<b>Total Requested</b>	

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## General Information

Project Title	
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Project Duration (months)	
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Type of Applicant	
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Type of Application	
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Title  
Forename(s)  
Surname  
Date of Birth  
Gender

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

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## Overview

### Abstract

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### MeSH Terms

#### MeSH Terms

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### 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 - Italia

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## Type of Research

Disease name

Disease code

*Please select what code or codes you can provide for the disease specified above.*

ORPHA Number

ICD-11 code

Disease OMIM number

Research Type

Research Step

## Background and Rationale

### Background - Rationale - Objectives

### Preliminary Results

*If available*

### Background on Intellectual Property

Specific Aims and Experimental Plan

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<b>Expected Outcomes and Future Development</b>
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Cited Literature

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## Host Institution and Overall Information

Institution	
Department	
City	
CAP / Zip Code	
Region	
Province	
Country	

### APPLICANT

Permanent position	
Position Title	
Main research fields	
Name of the Laboratory	
Number of staff members	
Are you Head of the Laboratory?	
Any other appointment (including foreign)?	

### Other appointment

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### FACILITIES AND RESOURCES

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

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

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

Does your proposal involve vertebrate animals?	
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## Budget

### Salaries

	Year 1	Total
Cost		

Salaries description

### Materials, Supply and Services

	Year 1	Total
Cost		

Materials, Supply and Services Description

### Travel Costs

	Year 1	Total
Cost		

Travel Costs description

### Other Expenses

	Year 1	Total
Cost		

Other Expenses Description

Overhead %	
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<b>Totals</b>	
	<b>Total</b>
Salaries	
Materials, supplies and services	
Travel Costs	
Overhead	
Other Expenses	
<b>Total</b>	

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## Personal Data and CV

### Education / Training

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

### Positions

From	To	Position	Department	Organisation

### Personal Statement

Date	Details

### Additional Info

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### Financial interests disclosures

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### ID Researcher Form

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### Personal author ID

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### Publications relevant to this proposal

Publications

## Reviewers

### **Suggested Reviewers**

Please provide details of any Suggested Reviewers for your grant application.

### **Excluded Reviewers**

Please provide details and reason of any Reviewers that should be excluded from your grant application.

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## Notes

**Your Notes, if any**

Any personal comments, details or additional information the Applicant wishes to add to any specific sections of the Application can be inserted here. Please indicate which section you are referring to and the reasons for including more information.

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## 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.

<b>Full Name</b>	
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<b>Place/Date</b>	
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