**EMSO ERIC Physical Access**

**Proposal Submission Form**

2022 Call

***Form to be sent in pdf format to EMSO ERIC physical-access@emso-eu.org***

*Please consult rules for Physical Access at https://emso.eu/physical-access/*

**General information**

We will ask users to fill out this application form with a font size at 11 point and to use single spacing for the text.

The following table will be used to evaluate the proposals:

|  |  |  |
| --- | --- | --- |
| **Evaluation Criteria (& maximum pages)** | **Max points** | **Threshold** |
| Scientific and technical objectives (Potential interest to the research/service provider community; Originality and innovation, European relevance) – **2 pages** | 10 | 7 |
| Quality of the methodology and implementation: clarity, adequacy in relation to set objectives, work plan, adequacy with the infrastructure (incl. e.g. prior scientific, technical or logistical arrangements, risk table) – **3 pages** | 10 | 7 |
| Scientific/Technical Excellence of user group – **2 pages** | 10 | 7 |
| International collaboration. 4 points if the user is from a different country than that of the access provider. 3 points if the user group is multinational (i.e. members working in entities from 2 or more countries) | 7 | 3 |
| Bonus points. Links or potential for seeding links with European Industry (for Research Institutions) or Innovation and potential new products or patents (for SMEs and Industries) – **1 page** | 8 | - |
| **Total points available** | **45** | 30 |

**Part 1: Proposal and User group information**

**Proposal title and acronym**

*<Provide here the title given to your project and its acronym>*

**Letter of Intent**

*<Provide here the reference number of the related Letter of Intent>*

**Previous application/submission**

**Is this a resubmission of an evaluated EMSO Physical Access Proposal?** □ Yes □ No

*<if yes, please provide the reference number>*

**Have you submitted another application for EMSO Physical Access (in past calls or presently)?** □ Yes □ No

*<if yes, please provide the reference number >*

**Have you already submitted an application for one of the EMSO facilities, under FixO3 or another EU programme?**  □ Yes □ No

*<if yes, please provide the facility name, facility contact person for the application and the reference number>*

**EMSO Regional Facility**

*<Name of the facility you wish to use for your project>*

**Modality of Access**

□ **MoA 1 – Remote** (the presence of the user is not required at any time during the access period)

□ **MoA 2 – Partially remote** (the presence of the user is required at some stage, e.g. for installing and uninstalling an instrument)

□ **MoA 3 – In-‐person** (the presence of the user is required/recommended during the whole access period)

**Availability and Feasibility of the project**

|  |  |
| --- | --- |
| *<The following is to be filled by the host>* | |
| **Availability** | □ Yes □ No |
| **Feasibility** | □ Yes □ No |

**Principal Investigator**

|  |  |
| --- | --- |
| **First and last name** |  |
| **Gender** | □ Male □ Female |
| **Institution** | *<Provide your institution name, address and country>* |
| **Email address** |  |
| **Telephone** |  |
| **Fax** |  |

**Project team (details for each member)**

*Member #1*

|  |  |
| --- | --- |
| **First and last name** |  |
| **Gender** | □ Male □ Female |
| **Institution** | *<Provide your institution name, address and country>* |
| **Email address** |  |
| **Telephone** |  |
| **Fax** |  |

*Member #2*

|  |  |
| --- | --- |
| **First and last name** |  |
| **Gender** | □ Male □ Female |
| **Institution** | *<Provide your institution name, address and country>* |
| **Email address** |  |
| **Telephone** |  |
| **Fax** |  |

<*More members can be added here copying the above table*>

**Part 2:** **Scientific and technical objectives (2 pages, 10 points, threshold 7)**

**Description**

*<Describe the objectives, context and rationale of your project>*

**Summary of objectives**

*<Briefly recap objectives in a bullet point list>*

**Interests for the scientific community**

*<Describe here the potential interest for the research community>*

**Originality and innovation**

*<Describe here the original and innovative aspects of your project and the science and/progress that will result from it, including potential for industrial outputs where applicable>*

**Part 3: Quality of the methodology and implementation (3 pages, 10 points, threshold 7)**

**Methodology and work plan**

*<Provide here the proposed method, work plan and seasonal schedule for your project; Please be as specific as possible>*

**Choice of facility**

*<Describe briefly the reason why you chose this facility and why it will be best carried out on it>*

**Alternate facility**

*<If possible, name another EMSO TNA observatory in which the project could alternatively be carried out>*

**Material and equipment for your project**

*<Make a list of equipment and material you wish to use during the experiment on the facility, if any>*

**Requirements and requests**

*<Please list the specific requests or requirements demanded by your project: equipment, instruments, services, data, etc>*

**Budget**

*<Please use the table below to budget the different actions needed to carry out the project in line with the Work Plan presented in Part 3. Within every action describe the number of Access Units (days) and their Modality of Access (MoA) requested to the facility, the Access Unit cost and the total cost of the facility access. Likewise, add the operational costs, travel expenses, equipment shipping costs and consumables needed to carry out the project>*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Concept** | **Amount** | **Price per unit** | **Total EUR** | **EMSO Funding EUR** |
| *Action 1* | | | | |
| Travel 1 |  |  |  |  |
| Shipping 1 |  |  |  |  |
| Consumables 1 |  |  |  |  |
| Access Units MoA xx |  |  |  |  |
| … |  |  |  |  |
| *Action 2 (add more actions below if needed)* | | | | |
| Travel 1 |  |  |  |  |
| Shipping 1 |  |  |  |  |
| Consumables 1 |  |  |  |  |
| Access Units MoA xx |  |  |  |  |
| … |  |  |  |  |
|  |  |  | **SUM HERE** | **SUM HERE** |

<Use this space if you need to clarify some of the concepts added to the budget>

**Risks and contingencies**

*<Describe here the potential risks and contingencies that might occur during the proposal and/or the project>*

*<How do you plan to* ***avoid, mitigate or resolve*** *them>*

**Part 4: Scientific/Technical excellence of user group (2 pages, 10 points, Threshold 7)**

**Short biography of the Principal Investigator**

*<Provide here a short biography of the Principal Investigator>*

**Group expertise in the domain of application**

*<Provide here a short summary of the group expertise in the applied field>*

**List of recent relevant publications/patents/achievements of the team members**

…

…

…

**Part 5: Links or potential for seeding links with Industry/Potential products or patents (1 page, 8 points, no threshold)**

*<Describe here the potential links with Industry and European enterprises interested in the results (if you are a research institution). Describe the outcomes regarding products, intellectual property or patents (if you are a private company)>*

*By completing this registration form, the user group team agrees with the terms and conditions for Physical Access within the EMSO ERIC Physical Access framework.*

**Date and Signature of the Principal Investigator**

**Date and Signature of the Facility Manager**

**(Section reserved to EMSO ERIC Physical Access Programme)**

**Date of submission:** *<DD Month YYYY>*

**Reference number:**

**Signature of EMSO ERIC Engineering and Logistics Officer:**