FRANCE-BIOIMAGING

Internal Call 2021

Technology transfer from the R&D teams to the facilities of France-BioImaging

Application form

***Document to be submitted online at:***

[***https://france-bioimaging.org/application/techtransfer-call-2021/***](https://france-bioimaging.org/application/techtransfer-call-2021/)

# Acronym and Title of the project

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# Team(s) & Facility(ies) involved

**Team R&D 1 (leader)**

|  |  |
| --- | --- |
| **R&D Team name** |  |
| **Team Leader *(name, surname, e-mail)*** |  |
| **Research Unit** |  |
| **Unit Director** |  |
| **Institutional affiliation(s)** |  |
| **Site**  |  |
| **FBI contact in the team (*name, surname, e- mail*)** |  |

**FBI Facility 1**

|  |  |
| --- | --- |
| **Name of the Facility** |  |
| **Facility Leader *(name, surname, e-mail)*** |  |
| **Facility Director** |  |
| **Institutional affiliation(s)** |  |
| **Site**  |  |
| **FBI contact (*name, surname, e- mail*)** |  |

**Associated Team or Facility 2** *(if relevant, duplicate the above tables)*

**Associated company** *(if relevant)*

|  |  |
| --- | --- |
| **Person in charge**  |  |
| **Email** |  |
| **Phone Number** |  |
| **Company’s address** |  |

# Description of the project (3p max total)

**Abstract** *(10 lines max)*

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**Scientific Project** *(1.5 page max)*

*Context – State of the art; Innovation and originality of the proposal; Scientific quality, implementation; Competitive positioning*

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**Timeline - detailed program** *(1/2 page max)**Chronogram - Demonstrate the feasibility of the transfer project*

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**Transfer and beyond** *(3/4 page max)*

*1-Estimation of the user market* *and potential for user adoption; Economic impact and tech transfer potential and perspectives; 2-Access (explain how access will be provided and if there are conditions; what will be the usage cost for users; pricing); 3-Plan for training facility staff and users; 4-Plan for sustainability (how you will cover maintenance costs and HR costs beyond the funding period)*

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# Additional information for salaries/fellowship/running costs and equipment

**Amount of funding requested**

|  |  |
| --- | --- |
|  | €  |

**Description of expenses that will be made with the budget requested**

|  |  |
| --- | --- |
| Expenses | Amount |
|  |  € |
|  |  € |
|  |  € |

**Host institution**

*Which structure will handle the funds?*

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**Total cost of the equipment including co-funding plan**

*Please indicate the amount and the percentage of implication of each co-funder.*

*NB: Co-funding letters signed by a qualified person will be asked to laureates before the signature of the funding agreement.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Equipment funding requested | Co-funding already  | Co-funding pending | Total cost |  |
|  |  |  |  | € |

**Equipment localization**

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| --- | --- |
| FBI Facility: |  |
| Node: |  |

# Annexe : Publications / patent

*Publications and/or patent related to the technology to be transferred, previous collaborations between teams and Facility.*

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# Visa / Signatures

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| --- | --- | --- | --- | --- |
| R&D Team Head (one visa per team involved) | Facility Head (one visa per facility involved) | Node Head (one visa per node involved) | Node co-Head (one visa per node involved) | Associated company (if relevant) |