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1400 Vienna, Austria

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**PROGRAMME OF COORDINATED RESEARCH ACTIVITIES**

Webpage: [cra.iaea.org](http://cra.iaea.org/)

### PROPOSAL FOR RESEARCH CONTRACT

***Please send your proposal for research contract to*** research.contracts@iaea.org. ***Only duly filled and signed proposals will be processed.***

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| *Research Contracts are generally awarded to institutions in developing countries or countries in transition insofar as they can effectively carry out the research. The template for Proposal for Research Contract is also used for Doctoral Contract and for Technical Contract.***NEW:*****AS OF 2016, RESEARCH CONTRACTS WILL GENERALLY BE AWARDED FOR THE ENTIRE DURATION OF THE CRP.****Renewal of* ***Contracts******approved before 2016*** *should be requested by the research institutions using the ‘Proposal for Research Contract’ Form and must be supported by reports on the technical progress of the research. If awarded, the next contract will, unless otherwise indicated, cover the remainder of the CRP.* |

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| 1. **CODE OF THE COORDINATED RESEARCH PROJECT (CRP) UNDER WHICH THE RESEARCH CONTRACT SHOULD BE PLACED:**

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| 1. **TITLE OF THE COORDINATED RESEARCH PROJECT (CRP) UNDER WHICH THE RESEARCH CONTRACT SHOULD BE PLACED:**

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| 1. **TITLE OF PROPOSED RESEARCH CONTRACT (should reflect the proposed research work – please also enter contract number for contract started before 2016):**

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| 1. **CONTRACTING INSTITUTION**

**(The contracting institution can ONLY be an institution with independent legal personality)**Inst. Name: Street:      P.O. Box:      Postal Code:      City:      Region/District:      Country:      Tel.:      Fax:      Email:       | 1. **IMPLEMENTING INSTITUTION:**

**(Where the research is performed - can be the contracting institution or a sub-institution, a branch of the main institution or a laboratory)**If not the contracting institute, please provide:Inst. Name: Street:      P.O. Box:      Postal Code:      City:      Region/District:      Country:      Tel.:      Fax:      Email:       |
| 1. **SUMMARY OF PROPOSED RESEARCH:**

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| 1. **PROJECT PERSONNEL (if space provided below is insufficient, please attach additional sheets)**
 |
| 1. ***Chief Scientific Investigator (CSI)***

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| **Family Name :** | **First Name:** | **Gender: M/F** | **Date of birth:****yyyy-mm-dd** | **Nationality:** |
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| **Telephone (office):** | **Fax (office):** | **Email (office):** | **Position held:** |
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| **Academic degree:** | **Subject:** | **Institution:** | **From:** | **To:** |
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Related scientific experience:      Recent publications related to the project (within the past 2-3 years):      % of total working time devoted to the project:      |
| 1. ***Secondary CSI (if applicable)***

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| **Family Name :** | **First Name:** | **Gender: M/F** | **Date of birth:****yyyy-mm-dd** | **Nationality:** |
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| **Telephone (office):** | **Fax (office):** | **Email (office):** | **Position held:** |
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| **Academic degree:** | **Subject:** | **Institution:** | **From:** | **To:** |
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Related scientific experience:      % of total working time devoted to the project:       |
| 1. ***Main additional Scientific Staff***

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| **Family Name :** | **First Name:** | **Gender: M/F** | **Date of birth:****yyyy-mm-dd** | **Nationality:** |
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| **Telephone (office):** | **Fax (office):** | **Email (office):** | **Position held:** |
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| **Academic degree:** | **Subject:** | **Institution:** | **From:** | **To:** |
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Related scientific experience:      % of total working time devoted to the project:       |
| 1. ***Main additional Scientific Staff***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Family Name :** | **First Name:** | **Gender: M/F** | **Date of birth:****yyyy-mm-dd** | **Nationality:** |
|       |       |       |       |       |

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| --- | --- | --- | --- |
| **Telephone (office):** | **Fax (office):** | **Email (office):** | **Position held:** |
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| **Academic degree:** | **Subject:** | **Institution:** | **From:** | **To:** |
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Related scientific experience:      % of total working time devoted to the project:       |
| 1. **PROPOSED RESEARCH PROJECT (if space provided below is insufficient, please attach additional sheets)**
2. ***Scientific Background***

     1. ***Scientific Scope of the Project (Scientific problems to be addressed with overall and specific objectives)***

     1. ***Overall programme of work for the whole duration of the Contract, including proposed methods or techniques***

     1. ***Detailed programme of work for the coming year (used as reference for the annual Progress Report)***

     1. ***Expected Outputs***

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| 1. **RELATED WORK ALREADY PERFORMED OR IN PROGRESS AT INSTITUTE (including work performed in connection with the IAEA through Technical Cooperation projects):**

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| 1. **FACILITIES and EQUIPMENT**
2. ***Please list facilities (building, equipment - including type and name of manufacturer, and materials) presently available which would be used for the project:***

     1. ***Equipment needed for the project which is not available under 10.A.:***

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| **Items** | **Estimated project costs in €** |
| **To be provided by the institution** | **To be provided by Other (non-IAEA)** | **Requested contribution from the IAEA** |
|       |       |       |       |
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| **Sub-total:** |       |       |       |

***If equipment contribution from the IAEA is requested,***1. ***will this equipment be purchased by the institute, using the cash award?*** [ ]  **OR**
2. ***shall the IAEA purchase the requested equipment on behalf of the institute?*** [ ]

***Please specify:***       |
| 1. **BUDGET Estimate of the project by year (please show all amounts in EUR €)**

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| **Project Year** | **1. Staff Costs** | **2. Equipment** | **3. Miscellaneous\*** | **Project Total (= 1+2+3) or (= 4+5+6)** | **4. Contribution by Institute** | **5. Contribution by Other(non-IAEA)** | **6. Requested contribution from the IAEA** |
| **1st** |       |       |       |       |       |       |  |
| **2nd** |       |       |       |       |       |       |  |
| **3rd** |       |       |       |       |       |       |  |
| **4th** |       |       |       |       |       |       |  |
| **5th** |       |       |       |       |       |       |  |
| **6th** |       |       |       |       |       |       |  |
| **Total** |       |       |       |       |       |       |  |

**\**If ‘Miscellaneous’ costs are entered in the table, please elaborate here:***      *NB.: Travel cost to Research Coordination Meetings (RCMs) should not be included in the Budget Estimate.* |
| 1. **PROPOSED PROJECT COMMENCEMENT DATE:**
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| 1. **ADDITIONNAL INFORMATION (if required):**

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| 1. **SIGNATURES**

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| **CHIEF SCIENTIFIC INVESTIGATOR:** |  | **HEAD OF INSTITUTE:** |
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|  |  |  |
|  |  |  |
|  |  |  |
| (Signature) |  | (Signature) |
|  |  |  |
|       |  |       |
| (Name and Title) |  | (Name and Title) |
|       |  |       |
| (Place and Date) |  | (Place and Date) |

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