

*safe*food - Commissioned Research

Tender Application Form

|  |  |
| --- | --- |
| Project Reference No. |  |
| Title of Proposal: |  |

THERE ARE THREE PARTS TO BE COMPLETED IN THIS APPLICATION FORM

PART I: DETAILS, DESCRIPTION & STRUCTURE OF YOUR PROPOSAL;

PART II: WORK PLAN SCHEDULE, PROJECT TASKS & DELIVERABLES;

PART III: PROPOSAL BUDGET.

Note: Please read the Application Guidelines before completing this form.

|  |  |
| --- | --- |
| Application No.  (For office use only) |  |

PART I: DETAILS, DESCRIPTION & STRUCTURE OF YOUR PROPOSAL

1. GENERAL INFORMATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Principal Contractor:  Name:  Position Held:  Research Body:  Address: | |  | | |
| Telephone: |  | | Email: |  |
| Area of Expertise of Principal Contractor: | |  | | |
| Project Duration (months): | |  | | |

2. COLLABORATORS (if any)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Collaborating  Contractor  Name:  Position Held:  Research Body:  Address: | |  | | |
| Telephone: |  | | Email: |  |
| Other Collaborating  Contractor  Name:  Position Held:  Research Body:  Address: | |  | | |
| Telephone: |  | | Email: |  |

3. PROPOSAL SUMMARY

|  |  |
| --- | --- |
| Five Key Words: |  |
| Please outline a summary of your proposal: *(max. 400 words)* | |
|  | |

4. BACKGROUND INFORMATION

|  |
| --- |
| **Please provide any background information to your proposal as appropriate:***(max. 500 words)* |
|  |

5. PROJECT OBJECTIVES & DESCRIPTION

|  |
| --- |
| **Please list the key Project Objectives with a brief description:** *(max.500 words)* |
|  |

6. RESEARCH METHODOLOGY

|  |
| --- |
| **Please detail your proposed research methodology:** |
|  |

7. ANTICIPATED OUTPUTS AND OUTCOMES OF RESEARCH

|  |
| --- |
| **Please elaborate on the anticipated outputs and outcomes of your proposal:** *(max. 500 words)* |
|  |

8. EXPECTED BENEFITS OF YOUR APPROACH AND VALUE FOR MONEY

|  |
| --- |
| **Please elaborate on the expected benefits and Value For Money of your approach:** *(max. 500 words)* |
|  |

9. ROLE OF COLLABORATORS, PARTNERSHIPS AND PROJECT MANAGEMENT

|  |
| --- |
| **Please describe the role of Collaborators & partnerships and your proposed Project Management:** *(max. 400 words)* |
| Please |

10. RESEARCH EXPERIENCE

|  |
| --- |
| **Please include the following:** A brief biographical sketch of the Principal Contractor and the key researchers involved (including Collaborating Partners), focusing on experience and listing recent publications (max. 5 references). Please include a note of any recent (last 3 years) funding or grants successfully applied for in related areas. |
| Please |

PART II: WORK PLAN SCHEDULE, PROJECT TASKS & DELIVERABLES

[THIS SHEET SHOULD BE COMPLETED IN CONJUNCTION WITH Q12 - PROJECT DELIVERABLES. PLEASE NOTE THAT THE NUMBER OF TASKS AND ASSOCIATED ACTIVITIES ARE EXAMPLES ONLY – PLEASE COMPLETE AS APPROPRIATE & USE EXTRA SHEETS IF NECESSARY]

11. TASKS & WORK SCHEDULE

### *Task 1: (Month x to y)*:

|  |  |  |  |
| --- | --- | --- | --- |
| Work Activity | **Start Month** | **Finish**  **Month** | **Deliverable Number** |
|  |  |  | D1 |
|  |  |  | D2 |
|  |  |  | D3 |
|  |  |  | D4 |

### *Task 2: (Month x to y)*:

|  |  |  |  |
| --- | --- | --- | --- |
| Work Activity | **Start Month** | **Finish**  **Month** | **Deliverable Number** |
|  |  |  | D5 |
|  |  |  | D6 |
|  |  |  | D7 |
|  |  |  | D8 |

### *Task 3: (Month x to y):*

|  |  |  |  |
| --- | --- | --- | --- |
| Work Activity | **Start Month** | **Finish**  **Month** | **Deliverable Number** |
|  |  |  | D9 |
|  |  |  | D10 |
|  |  |  | D11 |
|  |  |  | D12 |

### *Task 4: (Month x to y):*

|  |  |  |  |
| --- | --- | --- | --- |
| Work Activity | **Start Month** | **Finish**  **Month** | **Deliverable Number** |
|  |  |  | D13 |
|  |  |  | D14 |
|  |  |  | D15 |
|  |  |  | D16 |

### *Task 5: (Month x to y):*

|  |  |  |  |
| --- | --- | --- | --- |
| Work Activity | **Start Month** | **Finish**  **Month** | **Deliverable Number** |
|  |  |  | D17 |
|  |  |  | D18 |
|  |  |  | D19 |
|  |  |  | D20 |

12. PROJECT DELIVERABLES

[PLEASE NOTE THAT THE NUMBER OF TASKS AND ASSOCIATED ACTIVITIES ARE EXAMPLES ONLY – PLEASE COMPLETE AS APPROPRIATE]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Deliverables List linked to each of the Work Activities** | | | | | |
| **Deliverable No** | **Deliverable title** | **Delivery  Month** | **Nature[[1]](#footnote-1)** | **Dissemination level[[2]](#footnote-2)** |
| D1 |  | M1 |  |  |
| D2 |  | M2 |  |  |
| D3 |  | M3 |  |  |
| D4 |  | M4 |  |  |
| D5 |  | M5 |  |  |
| D6 |  | M6 |  |  |
| D7 |  | M7 |  |  |
| D8 |  | M8 |  |  |
| D9 |  | M9 |  |  |
| D10 |  | M10 |  |  |
| D11 |  | M11 |  |  |
| D12 |  | M12 |  |  |
| D13 |  | M13 |  |  |
| D14 |  | M14 |  |  |
| D15 |  | M15 |  |  |
| D16 |  | M16 |  |  |
| The nature of the deliverables : **R** = Report, **DN** = Demonstration, **P** = Product, **D** = Data, **I** = Information, **E** = Event.  2 The level of dissemination: **PU** = Public; **RT** = Restricted to the Research Team; **RE** = Restricted to the Research Team & ***safe*food**; **CO** = Confidential (for ***safe*food** only). | | | | |

PART III: PROPOSAL BUDGET

13. SUMMARY OF FINANCIAL BREAKDOWN OF THE ELIGIBLE COSTS

[PLEASE COMPLETE AS APPROPRIATE – DELETE UNREQUIRED EXPENDITURE HEADINGS]

|  |  |  |  |
| --- | --- | --- | --- |
| Category | Research Body | Total | % of Total Cost |
| **1. Salaries** | Research Body A |  |  |
|  | Research Body B |  |
|  | **Total** |  |  |
|  |  |  |  |
| **2. Consumables** | Research Body A |  |
|  | Research Body B |  |
|  | **Total** |  |  |
|  |  |  |  |
| **3. Equipment** | Research Body A |  |
|  | Research Body B |  |
|  | **Total** |  |  |
|  |  |  |  |
| **4. Travel & Subsistence** | Research Body A |  |
|  | Research Body B |  |
|  | **Total** |  |  |
|  |  |  |  |
| **5. Miscellaneous A** | Research Body A |  |
|  | Research Body B |  |
|  | **Total** |  |  |
|  |  |  |  |
| **6. Miscellaneous B** | Research Body A |  |
|  | Research Body B |  |
|  | Total |  |  |
|  | **Sub- Total** |  |
|  |  |  |  |
| **7. Overheads\*** | Research Body A |  |  |
|  | Research Body B |  |
|  | **Total** |  |  |
| **TOTALS** | Research Body A |  |  |
|  | Research Body B |  |
|  | **OVERALL TOTAL** |  | **100%** |

\*Please note that maximum overheads is 15%

\*\* Please note that all costs should be VAT inclusive as appropriate

14. EXPLANATION OF ELIGIBLE COSTS OF THE PROJECT

|  |  |
| --- | --- |
| **1. SALARIES** | |
| **Total Cost:** |  |
| **Purpose of Labour:** |  |
| **Please provide a breakdown of the different types of employees required and associated cost:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please outline their respective tasks:** |  |
| **What grade or basis is this salary cost based upon:** |  |
|  | |
| **2. CONSUMABLES** | |
| **Total Cost:** |  |
| **Please provide a breakdown of the different types of consumables required:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please describe:** |  |
| **How has this cost been estimated:** |  |
|  | |
| **3. EQUIPMENT** | |
| **Total Cost:** |  |
| **Please provide a breakdown of the different types of equipment required:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please describe:** |  |
| **How has this cost been estimated:** |  |
|  |  |
| **4. TRAVEL & SUBSISTENCE** | |
| **Total Cost:** |  |
| **Please briefly outline the anticipated nature of travel and number of staff involved:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please describe.** |  |
| **How has this cost been estimated:** |  |
|  | |
| **5. MISCELLANEOUS A** | |
| **Total Cost:** |  |
| **Please outline the requirement for A:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please describe:** |  |
| **How has this cost been estimated:** |  |
|  | |
| **6. MISCELLANEOUS B** | |
| **Total Cost:** |  |
| **Please outline the requirement for B:** |  |
| **Will this cost be divided amongst a number of Research Bodies: If so, please describe:** |  |
| **How has this cost been estimated:** |  |
|  | |
| **7. OVERHEADS** | |
| **Please state the required overhead allowance (Max. 15%)** |  |

**\* Please note that all costs should be VAT inclusive as appropriate.**

DECLARATION

I declare that the information contained in this application is true to the best of my knowledge and I declare that the project will not be the subject for grant aid from any other source.

Signed by the Principal Contractor on behalf of any or all collaborators.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A signed electronic copy of the proposal should be e-mailed to [research@safefood.net](mailto:research@safefood.net).

The subject line should read *Research Tender Date 2024 – Project XX-2024*. The electronic copy must be received by *safe*food no later than 4pm Friday 3rd May 2024.

Email: [research@safefood.net](mailto:research@safefood.eu)

1. [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)