Appendix 1

**RESEARCH PROJECT PROPOSAL – year**

1. Applicant:
2. Principal Investigator:
3. Principal Investigator’s Supervisor:
4. Name of the department, where the project will be carried out:
5. Title of the project:
6. Description and justification of the project: (minimum 3 pages)
7. The objectives of the project
8. Methodology
9. Expected scientific and applicative effects
10. Literature
11. Abstract (no more than 2,000 characters)
12. Information about the other Investigators (names, title, academic degree, position)
13. Research task has to be evaluated by: *(check as appropriate)*

* Bioethical Committee
* Ethics Committee for Animal Research
* Is not subject to the evaluation, because it uses tissues collected in experiments, which obtained prior ethics approval No.
* NA - not applicable

1. Budget of the project

|  |  |
| --- | --- |
|  | The amount planned for 2019 (in PLN) |
| 1. Equipment (above 10 000 PLN) *NOTE: The pipettes and reagents are not equipment* |  |
| 2. Small laboratory equipment and reagents |  |
| 3. A) Outsourced services (translation, statistics, proofreading, others – invoice required) |  |
| 3. B) Outsourced services (publication fees) |  |
| 4. Remunerations (translation, statistics, proofreading, others - civil law contracts) |  |
| 5. Business trips (domestic and international) |  |
| 6. Other costs (e.g. Office supplies, animals, small equipment) |  |
| Total costs |  |

Justification of the planned expenditures:

1. Equipment *(please specify which equipment is necessary to perform the project and justify the objective of purchase)*

2. Small laboratory equipment and reagents

3. Outsourced services

4. Remunerations

5. Business trips

6. Other costs

1. Acceptance

|  |  |  |
| --- | --- | --- |
|  |  | Signature |
| Head of the department employing the applicant |  |  |
| Head of the department, where project will be carried out |  |  |
| Principal Investigator (Applicant) |  |  |

*Date*

|  |  |
| --- | --- |
| *Principal Investigator’s Signature* | *Principal Investigator Supervisor’s Signature* |
| *Head of the PhD Studies Signature* | ***Acceptance of the Vice Rector for Scientific Affairs MUB*** |

|  |  |
| --- | --- |
| **Will** **the project** **be** **carried out** **in the hospital**? | Yes/No (*if ‘Yes’, please provide the name of the hospital*): |
| **Will the project** **be** **carried out** **with patients**? | Yes/No  □ No of patients:  □ No of blood tests: |
| **Will** **the project** **be** **carried out** **in cooperation with other** **domestic and foreign** **entities**? | Yes/No (*if ‘Yes’, please list the entities*): |
| **Will biotechnological methods** **be used** **in while carrying out** **the project**? | Yes/No |
| **Will nanotechnological methods** **be used**  **while carrying out** **the project**? | Yes/No |
| **Will experimental animals** **be used while carrying out** **the project** **(rats, mice)?** | Yes/No |

*Date Principal Investigator’s Signature*