

**S&T Cooperation Programme
between the Republic of Albania and
the Republic of Austria
(2015-2016)**

Proposal No.* :
Project Reference Number* :

PROJECT PROPOSAL

(To be completed by both National Project Coordinators)

A. GENERAL INFORMATION

A1. *Joint Research Project* *Technical Assistance Project* *Networking Project*

A2. **Title of the project :**
.....
.....
.....

A3. **ACRONYM (if any):**

A4. **Duration (in months):**

A5. **Planned starting date:**

A6. Information about the Austrian Project Coordinator :

Name :

Title : (Prof., Dr., Mr., Mrs.) :

Profession – Duties :

Institution :

Address :

Telephone : Telefax : E-mail :

A7. Information about the Albanian Project Coordinator :

Name :

Title : (Prof., Dr., Mr., Mrs.) :

Profession – Duties:

Institution :

Address :

Telephone : Telefax : E-mail :

A8. Cost Summary Table

Contribution of Parties	Total Cost	Requested
<i>Austrian Part</i>	000 Euro	
<i>Albanian Part</i>	000 Lekë	

B. PARTNER INSTITUTIONS AND SCIENTISTS

B1. Austrian Partners

B1.1. Coordinator Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B1.2. Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B1.3. Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B1.4. Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B2. Albanian Partners

B2.1. Coordinator Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B2.2. Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B2.3. Institutions:.....

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name***	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B.2.4. Institution :

Type of Organization (mark with a cross as appropriate)

University		Research Institute		Public or Private Enterprise		Other (specify)	
------------	--	--------------------	--	------------------------------	--	-----------------	--

Address :

Telephone : Telefax : E-mail :

Scientists:

	Name***	Title (Prof., Dr. Mr., Mrs.)	Profession- Duties	Time Percentage Participation
1.				
2.				
3.				
4.				
5.				

B3. SUMMARY TABLE OF PARTNER INSTITUTIONS COSTS

Partner Institutions		Total Cost	Requested
<i>Austrian Partners</i>		000 Euro	
Coordinator 1.			
2.			
3.			
4.			
Totals			
<i>Albanian Partners</i>		000 Lekë	
Coordinator 1.			
2.			
3.			
4.			
Totals			

C. PROJECT DESCRIPTION

C1. A summary :

C2. Goals and Objectives

C3. Expected achievements and benefits :

C4. State of the art in both countries and on international level in the particular field of the project. Please provide a short list of relevant literature.

C5. Experience of the Austrian and Albanian team in the proposed subject.

C6. Proposed methodology and justification.

D. TIME – SCHEDULE AND STAGES OF THE PROPOSED PROJECT

D1. Main activities of each research team at each stage

Austrian partners

Albanian partners

D2. Work plan for each team, timetable and expected duration of the scientific visits of both parties.

Austrian partners

Albanian partners

E. BUDGET BREAKDOWN

E1. Austrian part

Nr. of art.	Name of article	Funding (in 000 Euro)		
		Requested from OeAD	By the Austrian Partner Institutions themselves	Total
	Materials and Services			
	<i>Travel & Subsistence</i> - In the country - Out of the country			
	<i>Consumables</i>			
	<i>Basic Services</i> - Telephone, Fax			
	<i>Transport expenses</i> - Motor fuel, tires, lubricants			
	<i>Other operative expenses</i> - Expenses for official receptions			
	Durable Equipment			
	TOTAL			

E2. *Albanian part*

Nr. of art.	Name of article	Funding (in 000 Lekë)		
		Requested from ARTI	By the Albanian Partner Institutions themselves	Total
	Materials and Services			
	<i>Travel & Subsistence</i>			
	- In the country			
	- Out of the country			
	<i>Consumables</i>			
	<i>Basic Services</i>			
	- Telephone, Fax			
	<i>Transport expenses</i>			
	- Motor fuel, tires, lubricants			
	<i>Other operative expenses</i>			
	- Expenses for official receptions			
	Durable Equipment			
	TOTAL			

Date:

SIGNATURES

Austrian Project Coordinator

Albanian Project Coordinator

F. APPENDIX I

(To be completed in case a Austrian or Albanian enterprise participates in the proposal)

F1. Full legal name and type of the enterprise :

F2. Mailing address (including postal code) :

F3. Telephone : Telefax : E-mail :

F4. Surname and Forename of :

- Chairman of the Board :
- Chief Executive Officer :

F5. Brief account of the establishment, structure and record of the enterprise :

F6. Financial details of the enterprise (in million Euro or in thousands Lekë) :

Year	Accounts receivable	Turnover	Year and Results
2011			
2012			
2013			

F7. Description of the main needs of the enterprise, expected to be covered by its participation to the project proposal.

F8. Description of the exploitation plan (industrial, commercial or other) of the project results by the enterprise :

F9. Statement to be signed by the authorized representative of the enterprise :

“The authorized representative of the enterprise certifies that the enterprise is in full knowledge and agreement with the submission of the proposal and that in case the proposal is selected for funding, the enterprise will cover the relevant financial contribution”.

Signature