Submit application online: [research@lymph-co.com](mailto:research@lymph-co.com)

**Consortium Initiation Grant**

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| **Grant application no. (to be filled in by Lymph&Co)** | | | |
| **Applicant**  Name  University/Institute  Department  Postal address  Phone  E-mail |  | | |
| **Co-applicant**  Name  University/Institute  Department  E-mail  **Co-applicant**  Name  University/Institute  Department  E-mail |  | | |
| **Aim/title of the Consortium** | *(max. 80 characters)* | | |
| **Planned meeting date, venue, number and names of participants** | Date:  Place:  Participants: | | |
| **Motivation** | *(please clearly motivate the necessity and relevance of the application and why funding or cosponsoring cannot be obtained from other sources)* | | |
| **Project description** | *(max. 500 words total)*  Background:  Objective of the Consortium:  Project plan:  Planned funding strategy:  Time lines: | | |
| **Members of the consortium** | *(name, affiliation, representative of a group or institution, expertise)* | | |
| **Requested support**  Concise justification of requested support | Total amount: €  Travel costs: €  Housing: €  Venue: €  Meeting costs: €  Other costs (please specify): €  *(max 100 words)* | | |
| **Other grant applications** | Did you submit (or do you have the intention to submit) a similar grant application to other funding organisations or companies (e.g. pharma)?  yes no  If so: - funding organisation:  - industrial support: | | |
| **Signatures** | Name | Signature | Date |
| Applicant |  |  |  |