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| **Logo FPC 2018** | **CALL FOR PROPOSALS :**  **GREAT JOINT PROJECT 2020** |

# Project synopsis

This synopsis is mandatory otherwise the full application form will not be evaluated (see § 11 of the call)

**Submission deadline:**

**December 15th, 2019 (1pm, Paris Time)**

This document (in English only) must be submitted by the coordinator

Mail to: [directionscientifique@fondationparalysiecerebrale.org](mailto:directionscientifique@lafondationmotrice.org)

For further information, please visit our website:

<http://www.fondationparalysiecerebrale.org>

Or contact: [ngenes@fondationparalysiecerebral.org](mailto:ngenes@fondationparalysiecerebral.org)

# Project synopsis

**Project Title:**

**Short Title :**

**Project Coordinato**r:

|  |  |
| --- | --- |
| Family Name, first Name |  |
| Name of Institution |  |
| Short name of the institution |  |
| Department |  |
| Position |  |
| Email Address |  |
| Country |  |
| Type of Entity | Academia, Clinical or Public Health, SME (small and medium enterprises) or Industry |

**Project Partners**:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | City, Country | Name of the Principal Investigator | Institution, Department, full affiliations | Short name of the institution | Type of entity: Academia, Clinical or Public Health, SME and Industry |
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**Scope of the project**

|  |  |
| --- | --- |
| Clinical research | 🞎 |
| Translational research | 🞎 |
| Public Health | 🞎 |
| Social sciences | 🞎 |
| Other | 🞎 please specify |

**Synopsis (Max 500 words)**

**Keywords**

Please identify 5 keywords that represent the scientific content of the proposal.

**Reviewers**

1/ Suggested reviewers (at least 2, max 5)

Name

Contact information

Affiliation(s)

Field(s) of expertise

Reason(s) why the person is being cited as preferred/suggested reviewer.

2/ Opposed reviewers (max 5)

Name

Contact information

Affiliation(s)

Field(s) of expertise

Reason(s) why the person is being cited as opposed reviewer.