Beyond animal testing, transitioning towards OOC **#OOCtransition**

**Application Document**

*All submissions should contain non-confidential information only. The submission should describe a research project.*

1. **General Info:**
   1. Title:
   2. Keywords (min4, max8): *E.g. Heart, Kidney, Perfusion etc*.
   3. Project start date:
   4. Project end date:
   5. Duration (weeks):

*Please note that funding will be provided for a maximum of 6 months.*

* 1. Applicant details:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personal Data of the applicant | | | | |
| Surname |  | Address (office address representing the entity, which shall receive the funding (e.g. the institute,) | Building & Street |  |
| ZIP |  |
| Name | City |  |
| Country |  |
| Name of Institute the proponent is affiliated to |  | Add address if different from above | Building & Street |  |
| ZIP |  |
| City |  |
| Country |  |
| Name and Place of research (where the  research described below will be performed) |  | Add address if different from above | Building & Street |  |
| ZIP |  |
| City |  |
| Country |  |

1. **Summary**

*Give a short project summary.  
Note that this summary will be made publicly available once the project has been selected for funding.*

Max. 1000 characters incl. spaces

1. **Innovation Level & Relevance to the 3R** 
   1. *Explain the excellence of your project taking into consideration the following points:*

* *Which innovation barrier needs to be addressed and explain how your solution, combined with Bi/ond devices, helps in overcoming the barrier*
* *Describe the innovation potential and the advance that your solution, in combination with Bi/ond devices, would provide compared to animal testing*

Max. 2000 characters + 1 diagram/figure

* 1. *Estimate the impact that your solution will have on reducing and or replacing animal testing (s.a. number of animals spared, costs incurred in animal testing).*

*Max. 1000 characters incl. spaces*

1. **Objectives**

*Describe the specific objectives for the project action. They should be clear, measurable, realistic and achievable within the duration of the action and with the funding available. Please remember that the project should mainly focus on setting up a new Organ-on-Chip models using Bi/ond devices. Please describe the envisioned follow-up of this project (research cooperation, scaling up, etc.).*

*Max. 1000 characters incl. spaces*

1. **Concept/Methodology**

*Describe the main idea, models or assumptions involved. Specify how you will use the Bi/ond devices and the methodology that you intend to use. Include relevant literature references when necessary. Insert citations in the text as numbers and list the references as note in the footer.*

*Max. 2000 characters incl. spaces + 1 diagram/figure.*

1. **Project Team** 
   1. *Please describe excellence and expertise of the main applicant and other possible collaborators and the benefit of this project for the main applicant.*

*Max. 1000 characters incl. spaces + 1 diagram/figure*

* 1. *The applicant has previous experience with microfluidics or organ-on-chips:*
* Yes
* No
  1. *Please provide an estimate on how many disposable chips you will use in one year:*

1. **Implementation** 
   1. ***Work plan description***

*Please provide a coherent description of tasks to be implemented within the project.*

*Max. 1000 characters incl. spaces.*

* 1. ***Deliverables***

*Please provide a coherent description of the deliverables to be achieved within the project.*

1. **IP Details**

|  |  |
| --- | --- |
| IP and Publications | |
| Is this technology patent protected? | * Yes * No * Don’t know |
| If yes: could you name primary patents? | |
|  | |
| Do publications exist for this technology? | * Yes * No * Don’t know |
| If yes: could you name three of them? | |
|  | |

1. **Terms and conditions**

|  |  |  |
| --- | --- | --- |
| Terms and Conditions | | |
| Confirmation on the correctness of the information | I, the applicant, herewith confirm that the information stated on this form is correct and to the best of my knowledge. | * Yes * No |
| Agreement on the terms and conditions | I, the applicant, herewith confirm to have read and understood the terms and condition of attached to this application form and I agree to be bound by its Terms and Conditions. | * Yes * No |
| Future updates | Would you like to subscribe to receive updates regarding future calls and initiatives, new products, events, and applications from Bi/ond? | * Yes * No |

1. **Data Privacy Information**

BIOND Solutions BV, Molengraaffsingel 12, 2629 JD Delft, The Netherlands, uses your personal data collected in this form for evaluating your application, including to contact you via phone or e-mail (Art. 6 (1) b) General Data Protection Regulation) and to track repeat and multiple applications from the same applicant.

We process the information you provide, in accordance with our Privacy and Cookie Policy (https://www.gobiond.com/privacy-notice-and-cookie-policy/). By providing the above information, you consent to such processing and you warrant that all information you provide about yourself is true, accurate, current and complete. Furthermore, you confirm that you obtained the explicit consent of any other persons whose personal data you may provide. You understand that transmission of information via the internet is not completely secure and is not encrypted; Internet or phone service providers are third parties used for delivery of the messages therefore you understand that transfer of messages via these communications channels are subject to their own terms and conditions.

Your personal data will only be shared by us with BIOND Solutions affiliates and partners, including, but not limited to an independent review committee evaluating your application for the purposes of such evaluation. Where we share your data with recipients outside of the EU, we conclude standard contractual clauses ("Clauses") issued by the EU Commission to safeguard your data.

You have a right to receive and inspect your stored personal data, to demand its correction or deletion, to object to its future use and to receive copies of the Clauses, for example by contacting our data protection officer (info@biondteam.com). We will keep your data as long as we may collaborate with you (now or in the future).

1. **Signatures**

|  |  |
| --- | --- |
| Name of Applicant in printed letters: |  |
| Date: |  |
| Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |