

E-Application ID

German title

English title

Applicant

Familyname

First name

ORCID No.

Research Institution of the applicant

Name of research institution

Institute/clinic

Department

Head of research institution (title/acad.degree, first name, family name)

Address of research institution

Street/nr

Postcode

City

<input type="text"/>	<input type="text"/>
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## Information about the project

Duration  Months

Independent applicant

Estimated share of requested funding in % to be spent at the research institution

%

Estimated percentage of total working time the applicant expects to devote to the research project

%

funding applied for  €

**FNWF form**

## Affirmation of applicant

I shall inform the FWF if I request support for this project from the FWF or from other organizations, or if additional support is granted. The FWF must be immediately informed of substantial changes of the project's general setting as described in the application, e.g. change of research institution.

I certify with my signature that the information provided herein is accurate and complete. I also confirm that all co-authors named in the attachment are familiar with the application's contents and that they agree with them.

The FWF is entitled to process all project-related data by computer, to publish excerpts of them in annual reports and to pass them on to third parties in anonymous form for statistical purposes or purposes relating to science politics.

The applicant is responsible for informing all project workers named in the application that their personnel data will be stored and processed by computer and that the FWF will not pass the information on to third parties unless there is a legal requirement for it to do so or if the passing on of these data is not covered by the approval given below.

The applicant gives his/her consent that in case a (co-)financing by other funding institutions is possible (in particular through Austria's federal states or other European funding institutions) all data related to the application as well as the outcome of the evaluation process might be passed on to these funding institutions.

The applicant gives his/her consent that the FWF will inform his/her research Institution about the decision concerning the application under consideration.

The applicant is authorised to withdraw her/his affirmation any time by a written request to the FWF. In case an affirmation to pass on project related data to third parts is withdrawn the FWF will as soon as the withdrawal is received stop forwarding project related data that may not be passed on without specific consent to third parts.

The applicant gives his/her consent that in the event that funding is granted, the German and English summaries of the application as well as the amount of the funds granted and subsequently the summaries of the final project report will be published on the FWF's web site.

.....  
Place, Date

.....  
Signature of applicant

## Affirmation of the research institution of the applicant

With regard to that part of the research project (see above) which concerns the research institution under my direction, I hereby consent to the performance of said research at my institution and declare that the institution's entire infrastructure will be made available to all persons involved in the project.

The research institution fulfills every prerequisite (structural, power supply, air-conditioning etc.) for installing and operating the equipment requested in the present research proposal.

The persons working on the project described in the present application have the right to publish in their own name scientific works resulting from the project. Restrictions can be made only in relation to the timing of publication, to avoid damage the novelty of the results. In any case, publication may take place three months after communication of the results to the research institution. If the employer elects to take up the results, this period is extended until the results have been adequately protected. The employer is required to request such protection without culpable delay.

The project leader has sole responsibility for deciding how the project funding transferred to the research institution is to be spent. Project money may be spent only in accordance with her or his instructions.

The project workers working at the research institution and financed by the FWF may work only on the funded project for the proportion of their time that they are funded by the FWF. The project leader is responsible for determining the content of their work and is the only person entitled to give subject-related instructions relating to the work on the project. No other person or body of the research institution may give subject-related instructions to project workers that are inconsistent with their work on the project or that might in any way hinder the project's performance.

.....  
Place, Date

.....  
Signature of head of research institution or of the person authorized by the research institution to sign the form

Stamp of research institution

**National research partner**

(please consult the "explanations and definitions" for the appropriate programme category)

Family name

First name

<input type="text"/>	<input type="text"/>
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**National research partner's research institution**

Name of research institution

Institute/clinic

Department

**Address f research institution**

Street/nr.

Postcode

City

<input type="text"/>	<input type="text"/>
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**Estimated share of requested funding in % to be spent at the research institution**

<input type="text"/>	%
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EMNF form

### **Affirmation of the national research partner**

I shall inform the FWF if I request support for this application from the FWF or from other organizations, or if additional support is granted.

The FWF is entitled to process all application-related data by computer, to publish excerpts of them in annual reports and to pass them on to third parties in anonymous form for statistical purposes or purposes relating to science politics.

The national research partner gives his/her consent that in case a (co-)financing by other funding institutions is possible (in particular through Austria's federal states or other European funding institutions) all data related to the application as well as the outcome of the evaluation process might be passed on to these funding institutions.) outcome of the evaluation process might be passed on to these funding institutions.

The national research partner gives his/her consent that the FWF will inform his/her research Institution about the decision concerning the application under consideration.

The national research partner is authorised to withdraw her/his affirmation any time by a written request to the FWF. In case an affirmation to pass on project related data to third parts is withdrawn the FWF will as soon as the withdrawal is received stop forwarding project related data that may not be passed on without specific consent to third parts.

.....  
Place, Date

.....  
Signature of the national research partner

FWF form

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## Affirmation of the research institution of the national research partner

With regard to that part of the research project (see above) which concerns the research institution under my direction, I hereby consent to the performance of said research at my institution and declare that the institution's entire infrastructure will be made available to all persons involved in the project.

The research institution fulfills every prerequisite (structural, power supply, air-conditioning etc.) for installing and operating the equipment requested in the present research proposal.

The persons working on the project described in the present application have the right to publish in their own name scientific works resulting from the project. Restrictions can be made only in relation to the timing of the publication, to avoid prejudicing the novelty of the results. In any case, publications may take place three months after communication of the results to the research institution. If the employer elects to take up the results, this period is extended until the results have been adequately protected. The employer is required to request such protection without culpable delay.

The national research partner, in accordance with the project leader, has sole responsibility for deciding how the project funding transferred to the research institution is to be spent. Project money may be spent only with the instructions of the national research partner in accordance with the project leader.

The project workers working at the research institution and financed by the FWF may work only on the funded project for the proportion of their time that they are funded by the FWF. The national research partner, in accordance with the project leader, is responsible for determining the content of their work and is the only person entitled to give subject-related instructions relating to the work on the project. No other person or body of the research institution may give subject-related instructions to project workers that are inconsistent with their work on the project or that might in any way hinder the project's performance.

.....  
Place, Date

.....  
Signature of head of research institution or of the  
person authorized by the research institution to sign  
the form

Stamp of research institution

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**Declaration on the opinion of the ethics commission**

Project title:

The applicant Uni Innsbruck hereby declares that the enclosed opinion or fundamental approval by the relevant ethics commission covers the full content of the research project as described in the application.

Applicants should note that in cases where incomplete or inaccurate information has been submitted to the relevant ethics commission, approved funds may be withdrawn, expenditures may be reclaimed, and proceedings may be initiated due to suspected scientific misconduct.

Compared to the research proposal submitted to the FWF, the following modifications to the application will be necessary due to the ethics commission's opinion:

Please describe and explain all necessary modifications below.

*FWF form*

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Place, Date

.....  
Signature of applicant