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| **CQDM’s Canada/Europe joint funding initiative**  **Partnering Interest Form** |
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| **Country and region (when applicable) to partner with****:**  **For Europeans: Canada :**  **For Canadians: Germany :  ; France :** Alsace Rhône-Alpes; **Belgium :**  Wallonia  **Note:** European applicants need to be from the private sector. Canadian applicants can be both from the private or public sector. | | | | | | | | | |
| **IDENTIFICATION** | | | | | | | | | |
| *Name:* | | | |  | | | | *Surname:* |  |
| *Company / University :* | | | | |  | | | | |
| *Address:* | | |  | | | | | | |
| *Country :* | |  | | | | *Telephone :* |  | | |
| *Email :* |  | | | | | | | | |

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| **Brief description of your sector of activity.** |
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| **Brief description of the expertise looked for in the partner and potential role** |
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| **KEYWORDS describing the proposed research project** | | |
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**Keywords to describe your expertise**  **Keywords for requested partner expertise**

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| **Therapeutic Domain/Indication** |  | **Therapeutic Domain/Indication** |
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| **Technical Expertise** |  | **Technical Expertise** |
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| **Name of potential partner (if applicable):** |

October 2015