**InnoMuNiCH Platform:**

**Germany-Japan Cooperation**

**Project Application Form**

If you are looking for a partner for your Germany-Japan Cooperation Project, please fill in the following sections to

1. have your request shared with the InnoMuNiCH Platform Committee Members (who forward the information to interested parties in their network), and/or
2. post your request on the InnoMuNiCH Platform website ([www.bio-m.org/innomunich](http://www.bio-m.org/innomunich)).
3. **Information to be shared with the InnoMuNiCH Platform Committee Members**

*(List of Committee Members available at* [www.bio-m.org/innomunich](http://www.bio-m.org/innomunich)*)*

*Please share non-confidential information only on this application form!*

1. **Title of your project**

****

1. **Information on your company/institution\***

**Name of your company/institution**

****

**Department**

****

**Website**

****

**Contact person (incl. job title)**

****

**E-mail**

****

**Telephone**

****

\*There is an option to anonymize the information of your company/institution:   
 **I request to anonymize the details of my company/institution.**

1. **Description of the project and the expertise that you bring into this project**

**(max. 2 A4 pages)**

*If you do not wish to disclose details, you can also provide a short project description only in box 3, leaving box 4 and 5 empty.*

|  |
| --- |
| Please type your text here. |

\* If you have additional information (including figure and table) that you wish to provide, please attach the data file to your e-mail.

1. **Project Collaboration Plan – Work Packages (max. 1 A4 page)**

|  |
| --- |
| Please type your text here. |

1. **What kind of technology/research expertise do you expect of your potential partner(s)? (max. ½ A4 page)**

|  |
| --- |
| Please type your text here. |

**6) Desired collaboration partner**

Biotech/Life Science/Pharmaceutical Company

*If you have any specific company(s), which you would like to collaborate with, please mention the name/s:*

|  |
| --- |
| Please type your text here. |

Academic group

*If you have any specific group/s, which you would like to collaborate with, please mention the name/s:*

|  |
| --- |
| Please type your text here. |

Other

*Please, specify:*

|  |
| --- |
| Please type your text here. |

No preference

**I hereby agree that the above information can be forwarded by the Committee Members to interested network contact**

**II. Information to be posted on the InnoMuNiCH Platform website***(*[*www.bio-m.org/innomunich*](http://www.bio-m.org/innomunich)*)*

*Please share non-confidential information only on this application form!*

1. **Title of your project**

****

1. **Information on your company/institution\***

**Name of your company/institution**

****

**Department**

****

**Website**

****

**Contact person (incl. job title)**

****

**E-mail**

****

**Telephone**

****

\*There is an option to anonymize the information of your company/institution:   
 **I request to anonymize the details of my company/institution.**

**3) Desired collaboration partner**

Biotech/Life Science/Pharmaceutical Company

*If you have any specific company/s, which you would like to collaborate with, please mention the name/s:*

|  |
| --- |
| Please type your text here. |

Academic group

*If you have any specific group/s, which you would like to collaborate with, please mention the name/s:*

|  |
| --- |
| Please type your text here. |

Other

*Please, specify:*

|  |
| --- |
| Please type your text here. |

No preference

**4) Short description of your project and collaboration partner request (max. ¾ A4 page)**

|  |
| --- |
| Please type your text here. |

**I hereby agree that the above information is listed on the website of the InnoMuNiCH Platform.**([www.bio-m.org/innomunich](http://www.bio-m.org/innomunich))