**Proposal Form: Clinical Research Fellowship Program 2025**

**Project Title:**

**Scope of fellowship:** Registry/observational cohort study [ ]

 Epidemiological research [ ]

 Prepare a clinical trial (AMG, MPG) [ ]

 Additional analysis of a completed trial [ ]

 Cochrane review [ ]

 Healthcare research (Versorgungsforschung) [ ]

 Other:

**Applicant:**

Name, Given Name:      ,

Name at birth       (if relevant for prior publications)

Date of birth:

Academic degree:

Department:

Current position:

Phone (mobile preferred)       E-mail:

**Project Mentor 1:**

Name, Given Name:      ,

Date of birth:

Academic degree:

Department:

Current position:

Phone (mobile preferred)       E-mail:

**Project Mentor 2 (if applicable:**

Name, Given Name:      ,

Date of birth:

Academic degree:

Department:

Current position:

Phone (mobile preferred)       E-mail:

**Type of application:**

First application: [ ]

Follow up application: [ ]  (of a project already funded, e.g. at end of study)

Application period:

**Project**

Abstract (250 words):

Key words (max. 5)

**Detailed Project description:**

(max. 3 pages)

**Project outline**

Current state of knowledge and research:

(max. 1 page, 5 key references)

Preparatory Work and prior experiences of the applicant, research group:

Potential applications prepared during fellowship:

Overall project:

Objectives and hypotheses

Expected project duration of the overall project:

Work plan and milestones of the overall project (modify as appropriate):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Action | Year 1 | Year 2 | Year 3 | Year 4 |
| Work package 1:  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Work package 2:  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Work package 3:  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Xxx |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

If applicable, which part of the project will be covered during the fellowship

Project partners, study groups, research collaborations:

Expected interactions with institutions of the UMC

IMBEI:

IZKS:

Other:

Detailed work program during fellowship:

If fellowship aims to prepare research project:

Expected funding source

Expected funding amount

Follow up fellowship planned, tick if yes: [ ]

Data handling:

How will data made be available to the UMC?

Publication plan

**Signatures and Attachments**

**Signatures:**

I, the Applicant, declare that

* the above information is correct to the best of my knowledge;
* with acceptance of the fellowship, I will abide to the rules and regulations of the Fellowship Program, of which I am aware, and will accept the decisions made by the evaluation committee;
* I will immediately inform the committee of any additional funding obtained for the conduct of the work as soon as I become aware of it;
* I will report on the progress of the project at the end of the funding period and after an additional 1.5 years;
* I will follow all regulations related to data protection.

Date, signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the Mentor, declare that

* I will supervise the progress of the project

I will support the applicant during the period following the grant and throughout the follow up process

Date, signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the Head of the applicant’s institution, declare that

* I have read and approved the proposal
* The applicant will be free of regular clinical duties throughout the fellowship period.

Date, signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attachments**

Applicant:

Academic Curriculum Vitae of the applicant, including list of publications if appropriate and prior experiences in the field.

Description of career goals and how the project would help to achieve those

Mentor:

Mentor statement on role of the project in the field, the likelihood of success of the proposed project and potential risks for realization and alternative plans for realization. Description, how project fits and augments current or future research activities and interaction with other institutions.