

Funds for clinical research on multiple myeloma

Research on multiple myeloma

A few questions about your research project

Give a title for your research project. *

This title will be used in our communication (jury, website, annual report). So please be as clear and as concrete as possible.

Briefly describe your research project in no more than six sentences. *

This description will be used in our communication (jury, website, annual report). So please be as clear and as concrete as possible.

Timing

When should your research project be starting or when did it start? *

What is the expected date when your research project will end? *

Budget

What is the cost of completing your research project? *

(Please enter the amount with no decimal point and no commas)

What is the amount of financial support that you are applying for from the Funds for clinical research on multiple myeloma? *

(Please enter the amount with no decimal point and no commas)

For what expenditure would you like to use the support from the Funds for clinical research on multiple myeloma?

What financial resources do you already have to implement your project? *

(How much funding have you already been awarded, and from whom?)

How much philanthropic funding have you already received for this project and from whom? *

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Details about your research project

What is the motivation for this research project? *

How will you approach the implementation of your research project? *

What concrete actions are you going to take to achieve concrete, measurable results? Describe them.

What change or impact are you expecting to make with your research project? *

Where will your research project be conducted? *

Please mention the postcode and the name of the district where your organisation is located.

- ☐ Your research project is concentrated in one city in Belgium
- ☐ Your research project concerns a whole province in Belgium
- ☐ Your research project concerns a whole community/region in Belgium
- ☐ Your research project concerns one country

Enter the city or postal code. *

Select the province *

Select the Community or Region *

Fill in the country. *

Specific questions

I. PROJECT INFORMATION: use this document

(please provide info on the three questions mentioned below in this document)

1. Main applicant, title of the project, scientific abstract & lay summary
2. Project description
3. Budget

II. TEAM INFORMATION & REFEREES: use this document

(please provide info on the three questions mentioned below in this document)

1. CV of the main applicant & relevant publications
2. Composition of the research team & collaborating team(s)
3. Short CV of each member of the main research team
4. Supporting letter(s)

Only the PDFs of these two annexes '*specific questions I & II*' must be linked to your online application form; no additional annexes other than these two PDF documents will be taken into account by the jury during its evaluation.

Thank you for your understanding.

Contact details

Practical details about the ORGANISATION which is submitting this project proposal.

You can only enter a limited number of characters. Please provide a concise, concrete description.

The organization

Official name *

Date of incorporation *

National number *

(if your organisation has no national number, enter 0)

Main telephone number *

(Write the number in international standard form, e.g. +32-2-511 18 40)

Main e-mail address

Website

Legal status *

- ☐ Commercial company
- ☐ De facto association
- ☐ Public sector - local
- ☐ Public sector - interlocal
- ☐ Private foundation
- ☐ Teaching institution
- ☐ Third sector company
- ☐ Public utility foundation
- ☐ University or college
- ☐ Not-for-profit organization

Additional information

We advise you to present your organisation (free of charge) on the website at bonnescauses.be, so that jury members can find detailed information about your

organisation there. The next time you submit an application form, all you will need to do is update this information.

Paid staff (expressed in full time equivalents - FTEs) *

Number of volunteers expressed in full time equivalents (not including the members of the Board of Directors)

What was the total budget of your organisation last year? *

Please enter whole numbers only, with no decimal point and no commas

Address of registered office

Street *

Number *

Box

Country *

Post code and municipality *

Postcode *

City *

Financial details

Name of your bank *

IBAN/Bank account number *

BIC code (SWIFT) *

Account holder

The contact person

Practical details about the CONTACT PERSON who is submitting this project proposal.

Please note: the name of the leader of the research project should be listed here. In case of selection, this projectleader will be named as beneficiary of the financial support.

Salutation *

Surname *

First name *

Role in the organisation

Telephone number

(Write the number in international standard form, e.g. +32-2-511 18 40)

Mobile phone

E-mail address *

The responsible person

Practical details about the RESPONSIBLE PERSON who is authorised to sign the (financial) agreement with the King Baudouin Foundation if the application is selected.

This may be the university rector, the director of the research centre or anyone authorised to sign an agreement on behalf of the university or research centre.

Salutation *

Surname *

First name *

Role in the organisation

Telephone number

(Write the number in international standard form, e.g. +32-2-511 18 40)

Mobile phone

E-mail address

Enclosures

Please submit the completed annex(es) together with your completed form. Your form will not be valid if it is submitted without the annex(es).

Please upload the completed project information *

Please upload the completed team information & referees *

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The King Baudouin Foundation of course complies with privacy legislation in this area.