	Ap	plica	ation	De	tails
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V General

1. Application Title* (Required)

2. First Name *

3. Last Name *

4.Email *

5. Job Position *

6. Your Country *

7. Institution *

8. Additional Third Parties Involved in the Project

9. Applicant Status *

10. Profession *

11. Main Field of Clinical Expertise *

12. How did you hear about the call for proposal? *

✓ Executive Summary

13. Executive Summary * 🚯

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	Please provide clear, concise, and relevant answers. Limit each field to a maximum of 4000 characters.				
	. The Problem * 👔				
	15. Proposed Solution * 👔				
	16. Target Customer Group * 👔				
	17. Value Proposition * 👩				
	18. Project Management * 👔				
	19. Milestones 👔				
	20. Key Risks * 👔				
	21. Has the idea ever been disclosed publicly? * 🕕				
	22. Please indicate if a patent was filed (with reference number)				
	23. Financials 🚯				
24. Project Duration (Months)					
	If available, upload relevant documents supporting your project proposal below. To upload multiple files, please select all files at once and upload.				
	Supported file types: .jpg, .jpeg, .png, .pdf, .doc, .docx, .xls, .xlsx, .csv, .ppt, .pptx				
	Uploaded Files:				

Sections