Proposal Submission Form



Integrating Activities/ E-Infrastructures/ Preparatory Phase A2.1: Participants

Proposal Numb	oposal Number 000000			Proposal Acrony	m			Participant Number					
If your organis		-	_	or FP7,	No	t in use							
Organisation L	Legal na	ame	Université catholique de Louvain										
Organisation short name			UCL										
										_			
				Administra	tive D	ata							
Legal address	3												
							•						
Street name	Place	Place de l'Université						Number 1					
Town	Louv	ain-la-Neuve			Postal Co	 Code/Cedex 1348							
Country	Belgi	um			1								
Internet homep	age	www.u	clouvain.be			<u> </u>							
			Statı	ıs of your Or	ganis	ation							
Certain types o	f organi	sations ber	nefit from sp	ecial conditions und	ler the F	P7 participa	tion rules.						
The Commission	on also	collects dat	a for statistic	cal purposes.									
The guidance r	notes wi	ll help you	complete thi	is section.									
	_			oposal coordinator. st modify it in the pro	•								
Non-profit organisation							yes]					
Public body							yes						
Research organisation							yes						
Higher or secor	ndary e	ducation es	tablishment				yes]				
			IV	lain area of activity	(NACE c	ode)			-				
Higher education)												

Proposal Submission Form



Integrating Activities/ E-Infrastructures/ Preparatory Phase A2.2: Participants

		Page 2 out of 2	
	no		
	no		
	no		
	yes		
	no		
par	nt(s)		
ropos	al?		
	no		
depe	ndence		
E	duardo		
	Sex	Male	
		1	

3. Is your annual balance sheet total smaller than € 43 million?											no			
4. Are you an autonomous legal entity?											yes			
You are NOT an and/or your answ In all other cases Please check the	er to	both quest might conf	ions 2 orm to	and 3 the Co	is "NO". ommissio	on's definition								
Following this ch	eck, d	lo you conf	orm to	o the C	ommissio	on's definitio	n of an	SME				no		
		Depe	nde	encie	es wi	th (an)	othe	r par	ticip	oa	nt(s)		
Are there depend	dencie	es between	your	organis	sation an	d (an)other բ	participa	ant(s) in	this pr	оро	sal?			
											no			
if Yes:														
Participant Numb	er		Orga	ınisatioı	n Short N	lame		Charac	ter of c	dep	endend	e		
C		-]	None							
C		-				1	None							
C	0				-									
					Co	ontact P	oint							
Person in charge is the one who th	(For e Cor	the co-ordi nmission w	nator	(partici ntact in	pant nun the first	nber 1) this p instance)	erson							
Family name Cortina Gil			il					name(s)	Γ	Eduardo			
Title		Prof.					_			_		Sex	Male	
Position in the or	ganis	ation		Group	leader								•	
Department/Facu	ulty/In:	stitute/Labo	orator	y name	/		Centre	de Phys	ique de	s Pa	articules	et Phenon	nenologi	e (CP3)
Address (if differe	ent fro	om the lega	al addı	ress)										
Street name	Cher	min du cyclo	tron							Nur	nber	2		
Town	Louvain-la-Neuve						Postal Code/Cedex 1348							
Country	Belgium							Phor	ne 1	[+32-10-	47 3242		
Phone 2	+32-1	0-47 3273			Fax	+32-10-45 2	183	•	E-m	- nail	Edua	rdo.Cortina	@uclou\	/ain.be
_									•					

1. Is your number of employees smaller than 250? (full time equivalent)

2. Is your annual turnover smaller than € 50 million?