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EUROPEAN COM 7th Framework Prog Research, Technolog Development and Development and Developmen		vork Program Technologic	ogramme on logical		ing Activities/ astructures/ ratory Phase	A2. Participa	
Proposal Number If your organisation	,	0	Proposal Ac r FP7,	, 	DevDet	Participant Num	iber 25
enter your Participant Identity ( Organisation Legal name Organisation short name		University o UNIGLA	f Glasgow				

### Administrative Data

Legal address

Street name	University	/ Avenue		Number	-	
Town	Glasgow		Postal Code/Cedex		G12 8QQ	
Country	United Ki	ngdom				
Internet homepage		http://www.gla.ac.uk/				

#### Status of your Organisation

Certain types of organisations benefit from special conditions under the FP7 participation rules.

The Commission also collects data for statistical purposes.

The guidance notes will help you complete this section.

The status of the organisation is set by the proposal coordinator. If you would like to modify this information, the coordinator must modify it in the proposal set-up page

Non-profit organisation

Public body

Research organisation

Higher or secondary education establishment

Main area of activity (NACE code)

R&D on natural sciences and engineering

# Proposal Submission Form



EUROPEAN COMMISSION 7th Framework Programme on Research, Technological Development and Demonstration

Integrating Activities/ E-Infrastructures/ Preparatory Phase

A2.2: Participants

/es	
/es	
10	
/es	

- 1. Is your number of employees smaller than 250? (full time equivalent)
- 2. Is your annual turnover smaller than € 50 million?
- 3. Is your annual balance sheet total smaller than € 43 million?
- 4. Are you an autonomous legal entity?

You are NOT an SME if your answer to question 1 is "NO" and/or your answer to both questions 2 and 3 is "NO".

In all other cases, you might conform to the Commission's definition of an SME. Please check the additional conditions given in the guidance notes to the forms

Following this check, do you conform to the Commission's definition of an SME

## Dependencies with (an)other participant(s)

Are there dependencies between your organisation and (an)other participant(s) in this proposal?

if Yes:

Participant Number		er	Organisation Short Name	Ch
	0		-	Nor
	0		-	Nor
	0		-	Noi

#### Character of dependence

lone		
lone		
lone		

no

#### **Contact Point**

Person in charge (For the co-ordinator (participant number 1) this person is the one who the Commission will contact in the first instance)

+44 141 330 4702

Family name	S	Soler			First name(s)			F.J. Paul		
Title	D	Dr.					Ľ	S	ex	Male
Position in the organisation			Reader							
Department/Faculty/Institute/Laboratory name/				Physics and Astronomy						
Address (if differe	nt from	n the legal addr	ess)							
Street name	Kelvin Building, University of Glasgow						Nu	mber		
Town	Glasgow					Postal Cod	le/Ce	dex	G12 8Q	Q
Country	United Kingdom					Phone 1	[	+44 141 3	30 4153	

Phone 2

+44 141 330 5881

Fax

E-mail p.soler@physics.gla.ac.uk

no	

no

no

no

yes