**Full Proposal for an Emerging Fields Project   
within the Framework of   
the FAU Emerging Fields Initiative**

**1. Project Overview**

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| **Project Title:** |  | |
| **Project Number:** |  | |
| **Coordinator:** | Title/First Name/Last Name: |  |
| Department/Institute/Clinic: |  |
| Telephone: |  |
| Email: |  |

**2. Further FAU Applicants (at least two Co-Applicants)**

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| --- | --- |
| **Department/Institute/Clinic:** |  |
| **Title/First Name/Last Name:** |  |
| **Email:** |  |

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| --- | --- |
| **Department/Institute/Clinic:** |  |
| **Title/First Name/Last Name:** |  |
| **Email:** |  |

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| --- | --- |
| **Department/Institute/Clinic:** |  |
| **Title/First Name/Last Name:** |  |
| **Email:** |  |

Further applicants can be added.

**3. Possible Extramural (i.e. Non-FAU) Cooperation Partners**

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**4. Details of the Project**(The information on item 4 shall not exceed 20 pages in the requested font: 11 cpi, Arial, ≥ single-spaced)

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| **a) Scientific Vision and Relevance of the targeted Emerging Fields Project:** |
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| **b) State of Research** (current knowledge, verified by the most important citations)**:** |
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| **c) Connection of the Activity to FAU’s Major Research Areas and Further Strategic Development:** |
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| **d)** **Scientific Goals of the Proposed Emerging Fields Project** (what is to be reached within the funding period?)**:** |
|  |
| **e) Estimated Innovation Height:** |
|  |
| **f) Risks and Risk Assessment:** |
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| **g) Qualification of the Group of Researchers for this Activity** (existing preliminary work, complementary expertise, previous successful joint activities)**:** |
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| **h) Publications of the Applicants on the Topic** (max. 5 accepted publications in total)**:** |
|  |
| **i) Draft of the Work Programme** (how do the applicants work together?)**:** |
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| **j) Measures Applied for** (which elements of the catalogue of measures are to be employed primarily and why?)**:** |
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