**Cross Border Collaboration Voucher**

(Application for Academic/Researchers/Research Co-ordinators)

Applicant Details & Declaration

**Name and Job Title:**

**Academic Institution**:

**Address (Inc Postcode & County**):

**Email**:

**Office Telephone No**: **Mobile**:

**Horizon 2020 Participant Identification Code (PIC)**

**Principal Area of Research and expertise of the Applicant**:

**Are you new to European Funding Programmes? Yes/No**

**Have you engaged with a mainstream development agency, Northern Ireland Contact Point (NICP) or European Advisor/National Contact Point (NCP) for Ireland[[1]](#footnote-1)**

**If yes, please provide their name and email address:**

**Office Use Only – PIC CHECK 🞏**

**DECLARATION:**

*An authorised officer of the Institution* ***MUST*** *complete this Declaration*

**Please tick this box to confirm that the re-imbursement of costs being claimed from InterTradeIreland under this claim has not and will not be claimed from another source.**

**Are you already in receipt of any public funding to develop a consortium for a Horizon 2020 proposal? Yes/No**

**If you have answered Yes to the above question please provide the name of the funding programme(s) and dates(s) funding awarded.**

**Please indicate who payment is to be made to (e.g.Institution/Academic)**

*All payments are made by BACS (please complete attached Bank Request Detail Form)*

**Name and Title of Authorised Officer with signature and or stamp from the Institution and DATE.**

**Signature Date**

**PLEASE COMPLETE THIS SECTION WITH AS MUCH DETAIL AS POSSIBLE IN ORDER TO SPEED UP THE ASSESSMENT PROCESS.**

**Research project description and cross-border partner**

**Please provide the target call identifier and deadline of the EU Horizon 2020 project that is being undertaken by your organisation – or that you plan to undertake.**

**Provide a brief description of the project proposal or your idea for research collaboration – even if it is at an early stage.**

**Provide the name and contact details (email, telephone, address of the potential partners that you intend to contact for this project.**

**Is this a new North/South partnership? Or has this partnership worked together before?**

**What relevant expertise will you and the organisation(s) you are meeting bring to the project or research being proposed? Vouchers can only be awarded where it is clear that this will be a beneficial addition to the project definition phase**.

**Your Organisation**:

**Potential Partner**:

**In the absence of InterTradeIreland funding would you still pursue a North/South partnership for this activity? Yes/No**

**If yes, please outline the benefit of receiving support.**

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**Terms and Conditions:**

1. Applications will only be accepted where the applicant plans to meet a potential Horizon 2020 partner(s) in the other jurisdiction. This may be another company (or companies) or a researcher(s) from a recognised institution.
2. Applications will only be accepted from researchers or research co-ordinators working with a recognised academic institution, research organisation or research centre.
3. Applications where the applicant has a beneficial interest in the potential partner will be deemed ineligible.
4. Applicants are required to disclose any related party interest (e.g. family relationship) between the project partners.
5. There is a limited budget for this scheme and InterTradeIreland reserve the right to fund only those applications, which, in the opinion of InterTradeIreland best meet the objectives of the scheme. Consequently submission of applications does not guarantee success. The decision to award support through the scheme will be final and no discussions will be entered into with applicants or third parties.
6. An applicant may only have one ‘active’ Voucher per partnership at any point in time.
7. The InterTradeIreland collaboration vouchers are non-transferable.
8. Applicants must submit any claims within six months of the date of the award letter and must use the Expenses Claim form provided. Applicants must also submit a feedback form (template will be provided) before reimbursement is paid.
9. Recipients of the voucher can claim expenses for **travel** and **accommodation** only; up to a maximum of £500 or Euro equivalent – including VAT. No subsistence will be covered by the Voucher. Mileage will be reimbursed at the InterTradeIreland approved rate of £0.45 (45 pence) **per mile** or € equivalent.
10. All travel and accommodation claims must relate solely to the activity and the partner(s) as stated in your application.
11. In no circumstances shall InterTradeIreland be liable in contract, tort (including negligence) or otherwise howsoever and whatever the cause thereof for any costs or expenses of the Applicant(s) other than those payable by InterTradeIreland pursuant to the award letter. It is the responsibility of the parties to the project to have adequate and appropriate insurances in respect of all insurable risks.
12. Applicants availing of this Voucher are obliged to assist and co-operate with InterTradeIreland in the ongoing monitoring of the outcomes of the support provided.
13. The Applicant shall ensure that all actions undertaken in relation to the Project comply with all domestic laws, statutes, regulations and the requirements of any governmental or regulatory authority applicable during the term of the Project including, without limitation, equal opportunities, fair employment, working conditions, health and safety and data protection legislation.
14. InterTradeIreland reserves the right to terminate the Voucher at anytime if it is determined by InterTradeIreland or its representatives that the work is not being undertaken to a satisfactory standard or funds are not applied towards the agreed project activity. Failure to comply with any elements of these terms and conditions may result in InterTradeIreland reclaiming the assistance given under it from the Applicant.

**In order to progress your application InterTradeIreland will be required to hold and process some of your personal data and we have detailed policies in place to do so.**

**You can find our Privacy policy and Data Retention Policy on our website *intertradeireland.com***

 **Please tick that you agree to InterTradeIreland holding and processing your data for business purposes in line with our data policies.**

 **Please tick here if you would like to receive our Ezine to update you about our business supports, free events and news that may interest you.**

WHAT HAPPENS NEXT

Send this completed form either by email or post to:

anne.mcminn@intertradeireland.com

or by post to:

FAO: Anne McMinn

Strategy & Policy Department

InterTradeIreland

The Old Gasworks Business Park

Kilmorey Street

Newry

Co Down

BT34 2DE

InterTradeIreland will assess your application and if approved an award letter will be issued.

**BANK DETAIL FORM**

**NB: For audit purposes, we must have your bank details presented on headed paper and signed by a director or person in authority**

|  |  |
| --- | --- |
| Organisation or Applicant Name |  |
| Reference |  |
| Bank Name |  |
| Bank Address |  |
| Bank Postcode |  |
| Account Name |  |
| Sort Code |  |
| Account Number |  |
| Iban |  |
| BIC/SWIFT |  |
| E-Mail Address |  |
| Payment Currency e.g. Sterling or Euros |  |
| If Euro please confirm the account specified will accept payments in Euro  | □ Confirmed □ To check |

**YOUR DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Position |  |
| Signature |  | Date |  |

**SHOULD THE ABOVE BANK DETAILS CHANGE PLEASE NOTIFY US IMMEDIATELY**

1. *InterTradeIreland is working closely with the National Support Network in Ireland and the Northern Ireland Contact Point Network to maximise the opportunities for North South collaboration in Horizon 2020.  By completing and returning this form you agree that this information can be confidentially shared within the network for the purposes of achieving this objective.* [↑](#footnote-ref-1)