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|   **EUROPEAN COOPERATION IN SCIENCE AND TECHNOLOGY** **COST PROGRAMME** |
| **APPLICATION FOR PARTICIPATION IN THE MANAGEMENT COMMITTEE (MC) OF COST ACTION**  |
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| TO BE COMPLETED BY THE APPLICANT |
| **APPLICANT’S NAME** |       |
| **COST ACTION TITLE**  |       |
| ACTION NUMBER  |       |
| FOR INTERNAL USE ONLY |
| **PROTOCOL NUMBER**  |  |
| **DATE OF RECEIPT** | \_\_\_\_ / \_\_\_\_ / \_\_\_\_ |
| **HAS BEEN EXAMINED ON**  | \_\_\_\_ / \_\_\_\_ / \_\_\_\_ |
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| **GUIDELINES FOR COMPLETION AND CHECK-LIST**After the completion of your application please consult the following **Check-List**, in order to confirm that no important data has been omitted.  |
| **Completion** | **All fields and / or tables** are **duly completed**. | [ ]  |
| **Page Numbering**  | All pages have **continuous numbering**. | [ ]  |
| **Signatures** | The **Declaration of the Participant** has been duly completed and signed.  | [ ]  |
| Only for Civil Servants: The Head of the Unit/Department/Service/Ministry has duly completed and signed the relevant **Approval**.  | [ ]  |
| **Criteria** | All criteria are met, according to the Document ‘**Criteria for Nominating in Running Actions of the COST Programme, General Rules and Procedures and Participants Obligations’.** In the document, the basic prerequisites for the approval of the participation in a Management Committee (MC) of a current COST Action are described. | [ ]  |
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| **Information:** The Application as well as the Document ‘**Criteria for Participation in Running Actions of the COST Programme, General Rules and Procedures and Participants Liabilities’** are available on RIF’s website (<http://www.research.org.cy>)For additional information, please contact the RIF Project Officer responsible for COST, Ms. Katerina Karakasidou.Address: 123, Strovolos Avenue, Nicosia Telephone: + 357 22 20 50 00, Fax: + 357 22 20 50 01 E-mail: costapplications@research.org.cy **Submission:** Please send the Application Form duly completed and signed by e-mail atcostapplications@research.org.cyor by post at P.O.BOX. 23422, 1683 Nicosia, Cyprus. |

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| **1. RESEARCHER’S DETAILS**  |
| **full name** |       |
| **ORGANISATION / DEPARTMENT** |       |
| **POSITION / capacity** |       |
| **Is your employment position OF A LIMITED DURATION (OR FIXED-TERM)?** In case your answer is YES, please attach a confirmation by your Employer indicating the duration of your employment contract.   | YES [ ]  NO [ ]  |
| **address**  |       |
| **telephone number** |       | **fax number** |       |
| **e-mail address**  |       |
|  |
| **2. ACTION DETAILS** |
| **action title**  |       |
| **action number** |       |

**3. PARTICIPATION IN THE INITIAL CONSORTIUM**

Please tick the relevant box accordingly. Please note that the participation in the initial consortium of a COST Proposal qualifies automatically a researcher to become a member in the Management Committee (MC) of the particular Action.

YES [ ]

NO [ ]

If you have selected YES above, please indicate your role in the initial consortium by ticking the relevant box below:

* Coordinator [ ]
* Member of the Research Team [ ]

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| **4. LEVEL OF PARTICIPATION** Please indicate in which of the following two levels you would like to participate in. Please note that in order to be nominated as an MC Substitute, the appointment of an MC Delegate from Cyprus in the Action must be in place. Please note that in order to participate ONLY in a Working Group of a current COST Action, it is not required to submit an Application Form to RIF. The only necessary action is to communicate to the Action Chair your interest. It should be noted that participation in a Working Group of any given COST Action is only allowed when the country has already appointed a Delegate in the Management Committee.  |

* Representative of Cyprus in the Management Committee of the Action (Management Committee (MC) Delegate) [ ]
* Substitute of the Representative of Cyprus in a Management Committee of the Action (MC Substitute) [ ]

 The Management Committee (MC) means the group of researchers, nominated by each COST National Coordinator (CNC), in charge of the coordination, implementation, and management of an Action's activities as well as supervising the appropriate allocation and use of the COST funding with a view to achieving the Action's scientific and technological objectives. MC is composed of up to 2 Representatives from each Member Country as well as up to 2 Members which will act as Substitutes of the Country’s respective Representatives in the Management Committee. Substitute members (MC Substitutes) attend meetings in case of absence of at least one of the two MC Delegates.

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| **5. PARTICIPATION IN OTHER COST ACTIONS**A researcher can participate in only one (1) running COST Action at any given time. Parallel participation in a second COST Action is allowed only if:(a) there is evidence of the involvement of the Applicant in the consortium establishing a successful running COST Action, or(b) the Action in which the Applicant already participates in as a Management Committee Delegate or Substitute will complete its activities in the next nine (9) months, following the submission of his/her Application.In regards to point (a) described above, it is clarified that the Rule refers to the participation of Applicants in two COST Actions at the same time, in which in one of the two they are involved in the consortium establishing the Action. Please refer to COST-4 document.  |

Do you already participate in other running COST Action?

Yes [ ]

No [ ]

If yes, please complete the following Table:

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| **domain committee** |  |
| **action title**  |       |
| **action number** |       |
| **date of completion of the action** |       |

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| **6. DECLARATION OF PARTICIPANT** |
| I, the undersigned, hereby declare that in case of approval of my participation in COST Action:1. I will actively participate in **all** the meetings and activities of the Action. When this is not feasible, I will inform the Research and Innovation Foundation (RIF) beforehand.
2. I will submit an Annual Report to the RIF and any other information requested, relevant to my involvement/participation in the Action’s activities.
3. I will participate in the annual meetings of the Representatives of Cyprus at the Management Committee level, convened by the Research and Innovation Foundation (RIF), presenting my involvement in current activities of the Action that I apply to participate.
4. I am committed to act for the benefit of the Republic of Cyprus and only that, and I will not take any actions that may harm its own good.
5. I will inform the Research and Innovation Foundation (RIF) of any change in my status (e.g. change of employer, leaving the Country)
6. All the information declared in this application is true.

***I understand that, the Research and Innovation Foundation has the right of re-examining my participation in case I do not comply with the rules and obligations.***  |
|
| **Signature of the Participant:**  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Full Name of the Participant**: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **7. Departmental Approval** Applies ONLY to the participation of Civil Servants.  |
| I ………………………………………………… Head of the Department/Unit/Ministry …………………………………… declare that I have been informed and I agree with the participation of Mr/Ms …………………………………… in the COST Action of the COST Programme with Number …………… |
|
| **Signature of the Head of the Department/Unit/Service:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Seal of the****Organisation**(if available) |
| **Date:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

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| **8. JUSTIFICATION FOR THE PARTICIPATION IN THE AFOREMENTIONED COST ACTION** Please justify below why you would like to participate in the COST Action. In addition, please describe briefly your qualifications and how these relate to the activities of the Action (max. 3 pages) |

**QUALIFICATIONS & EXPERIENCE**

(a) Academic Qualifications

 (b) Research Experience

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| **9. PARTICIPATION IN ONGOING RESEARCH PROJECTS RELEVANT TO THE ACTIVITIES OF THE ACTION**Information should be given ONLY for running Projects which have not been completed yet and in which you participate in at the time of the submission of this Application and relevant to the activities of the Action, as these are described in the relevant Memorandum of Understanding (MoU). These Projects may be funded by international, European, national or other funding.  |
| **TITLE OF PROJECT** | **ACRONYM** | **ESTIMATED DATE OF COMPLETION**  | **ROLE IN PROJECT** | **FUNDING AGENCY/ ORGANISATION** | **PROJECT WEBSITE** |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
| **TITLE OF PROJECT** | **ACRONYM** | **ESTIMATED DATE OF COMPLETION**  | **ROLE IN PROJECT** | **FUNDING AGENCY/ ORGANISATION** | **PROJECT WEBSITE** |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
|       |       |       | [ ]  Coordinator[ ]  Member of Project Team |       |       |
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 **10. RECENT PUBLICATIONS RELEVANT TO THE ACTION** (maxι 1 page)

List the most recent publications relevant to the COST Action as these are described in the relevant Memorandum of Understanding (MoU) of the Action in which you would like to participate in.

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| **11. PARTICIPATION IN A WORKING GROUP** |

Please indicate in which of the Action’s Working Groups you wish to participate and briefly explain the reasons. The activities of a particular Working Group are presented in the Memorandum of Understanding (MoU) of the Action, which is available online on the Action’s website at [www.cost.eu](http://www.cost.eu).

The Working Groups perform the necessary tasks required for the Action to fulfil its objectives as defined in the MoU. Participation in at least one Working Group of the Action is mandatory. (Up to 0.5 page)

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| **FOR INTERNAL USE ONLY**  |
| **Evaluation Criteria Checklist**  |
| **Criterion**  | **Explanation**  | **Fulfilment of Criterion** |
|  |  | ***YES*** | ***NO*** |
| **1. Relevant Running Research Project**  | Is there any evidence of active participation of the Applicant (as a Coordinator or Partner) at the date of the submission of the Application in a running ongoing research Project funded by International, National, European or other sources, relevant to the activities of Action, as these are described in the Action’s Memorandum of Understanding (MoU)? | [ ]  | [ ]  |
| **2.Recent Research Experience / Competence**  | Is there a proven recent research experience / competence of the Applicant in conducting research in a field relevant to the activities of the Action, as these are described in the Action's Memorandum of Understanding (MoU)? | [ ]  | [ ]  |
| **3. Publications**  | Are recent publications of the Applicant relevant to the scientific area / activities of the Action, as these are described in the Action's Memorandum of Understanding (MoU)? | [ ]  | [ ]  |

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| **EXAMINATION OF THE APPLICATION BY RIF** |
|  | ***YES*** | ***NO*** |
| 1. **APPROVAL OF THE PARTICIPATION OF THE APPLICANT IN THE MANAGEMENT COMMITTEE OF THE ACTION IN WHICH HE/SHE WOULD LIKE TO PARTICIPATE IN (UNDER THE STATUS THAT IS REPORTED ON THE APPLICATION FORM)**
 | [ ]  | [ ]  |
| If the abovementioned answer is NO, please explain.  |
|       |
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|  | ***YES*** | ***NO*** |
| 1. **IF THE ANSWER TO THE PREVIOUS QUESTION IS NO, WOULD IT BE POSSIBLE FOR THE APPLICANT TO PARTICIPATE ONLY IN A WORKING GROUP OF THE ACTION HE/SHE IS APPLYING FOR?**

Note: participation in a Working Group of any given COST Action is only allowed when the country has already appointed a Delegate in the Management Committee | [ ]  | [ ]  |
| If the answer to the previous question is YES, please elaborate further.  |
|       |
| **COMMENTS/SUGGESTIONS** Any comments/suggestions relating to the observance of the criteria should be reported below.  |
|       |
| **RIFs FINAL DECISION** Decision of the Director General  |
| The final decision of the RIF is reported below.  |