Appendix No. 1 to the Regulations

**Application within the competition for teacher grants**

1. **KEY DATA**
2. Personal data of the Applicant (head of the project)

*- First name and surname, title/academic degree, position, place of employment, represented academic discipline, personal SAP number*

1. Academic programme /specialisation the project applies to
2. Project title *(in Polish and English):*
3. Project summary in Polish *(up to 400 words.)*:
4. Project summary *(up to 400 words.)*:
5. **PROJECT DESCRIPTION**

|  |  |
| --- | --- |
|  | **OBJECTIVES AND JUSTIFICATION OF THE GRANT** |
| 1 | A substantive description of the solution, product, or service, which will be the outcome of grant implementation  |  |
| 2 | A financial description of the grant subject  |  |
| 3 | Justification of the demand for the grant outcomes |  |
| 4 | Justification of the effectiveness of the proposed solution  |  |
| 6 | A description of the implementation of the grant outcomes  |  |
| 7 | Assumed outcome |  |
| 8 | Assumed durability of the grant subject |  |
| 9 | A description of other benefits from the implementation of the grant outcomes  |  |

1. **PROJECT TIMETABLE**

|  |  |
| --- | --- |
| **C.** | **TIMETABLE OF GRANT IMPLEMENTATION**  |
| No. | **Title of the objective** | **Period of implementation**  |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |

1. **COST ESTIMATE OF THE PROJECT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|   | **No.** | **Planned costs** | **2021**  | **2022**  | **Total** |
|   | **I.** | **Total direct costs** | 0.00 | 0.00 | 0.00 |
|   | 1 | Fixed assets  | 0.00 | 0.00 | 0.00 |
|   | including | with a value from PLN 3,500 to 10,000  |   |  | 0.00 |
|   | with a value exceeding PLN 10,000  |   |  | 0,00 |
|   | 2 | Remuneration and related items | 0.00 | 0.00 | 0.00 |
|   | 3 | Other direct costs |   |   | 0.00 |
|   | **II.**  | **Indirect costs** *(15%)* | 0.00 | 0.00 | 0.00 |
|   | **III.**  | **Total costs** | 0.00 | 0.00 | 0.00 |

Justification of individual items in the cost estimate:

……………………….………………….. ……………………….…………………..

 (Applicant) (Bursar’s Proxy)

……………………….………………….. ……………………….…………………..

 (Faculty Dean) (Director of Institute *if applicable*)

**By submitting this Application, I accept that if the funding is granted, the name and surname of the head of the project, as well as the project title and the amount of the awarded funding will be published in the information on the competition and its results.**