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 to which the project applies.
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 FOR THE GRANT** |
| 1 | The objective of grant implementation and its compliance with the competition objectives  |  |
| 2 | Interdisciplinarity, innovativeness and teaching and learning value of the outcomes of the project implementation, inter-faculty, and inter-university collaboration with external entities  |  |
| 3 | Anticipated project outcomes and justification for the need for outcomes, the durability of project outcomes  |  |
| 4 | Justification for project implementation cost estimate |  |

1. **TIMETABLEOF GRANT IMPLEMENTATION**

|  |  |
| --- | --- |
| **C.** | **TIMETABLE OF GRANT IMPLEMENTATION** |
| No. | **Task title**  | **Period of implementation** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |

1. **COST ESTIMATE OF THE PROJECT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|   | **No.** | **Planned costs** | **20…. (year)** | **20…. (year)** | **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 | 0.00 | 0,00 |
|   | with a value exceeding PLN 10,000 | 0.00 | 0.00 | 0,00 |
|   | 2 | Remuneration and related items | 0.00 | 0.00 | 0.00 |
|   | 3 | Other direct costs | 0.00 | 0.00 | 0.00 |
|   | **II.**  | **Indirect costs** *(15%)* | 0.00 | 0.00 | 0.00 |
|   | **III.**  | **Total costs** | 0.00 | 0.00 | 0.00 |

Justification for individual items in the cost estimate:

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

 (Applicant) (Bursar’s Proxy)

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

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

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