# MDIA Applied Research Grant (MARG)

Call 2024

# **Application Form**





# 1 <u>Section 1 – Executive Summary</u>

## 1.1 Executive Summary

LACCULIVE	o ar i ii i iai	<i>y</i>			
Scheme					
MDIA Applie	ed Researcl	n Grant (MARG	)		
Project Title					
Project Sum	ımary:				
Expected	Start		Expected	End	
Date			Date		
Grant Requi	red		•		
				€	
Amount of p	oublic fund	ing needed for	the project		
Total Financ	ial Plan				
e: :::		I > / A =		I <b>-</b>	
Eligible	€	VAT	€	Total MAL	€
		Eligible <sup>1</sup>		Eligible	
Maria	6	NAT NISS	6	Tatal MainT	6
Non-	€	VAT Non-	€	Total Non-	€
Eligible		Eligible		Eligible	
				Total	€

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 $<sup>^{\</sup>rm l}$  VAT is considered eligible for funding if the entity applying for funding is 'exempt without credit', and cannot claim back input VAT.

## Section 2 – The Applicant 2

2.1 **Applicant Details** 

Applicant Details  Details	Research (RI)	Institution	Other participan (If applicable)	ts
Legal Name of Applicant				
Authorized Representative				
ID No. of authorized representative				
E-mail Address				
Legal Form of applicant	N/A		(Choose option) Registered Company Partnership Self Employed Co-operative Society Research Institution Other (Pleasindicate)	Se.
Registration/Identification number of applicant (If applicable)				
Date Established				
Registered Address				
Phone Number				
VAT Number (If applicable)				
Website Address (If applicable)				

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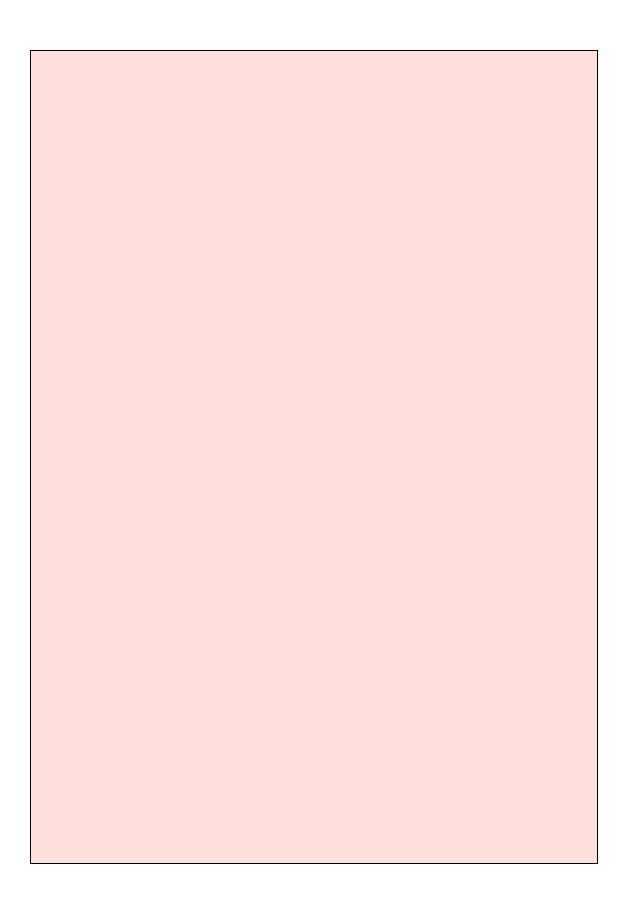
Project Owner / Manager details	Research Ir (RI)	nstitution	Other participants (If applicable)
Project Owner / Manager			
Name and Surname			
ID No.			
Position within Entity			
Phone Number			
E-mail Address			

2.2 Applicant's Core Business Activities (If Private Sector Entity is collaborating with Applicant or if the Applicant carries out an economic activity or will carry out such an activity as a result of the proposed project)

NACE Code	(eg.) 58.29	(e.g.) publis	Other software shing

Ρl	ease provide a	n outline of t	he A	Applio	cant's core bus	iness	acti	vities (providi	ng
а	background	description	of	the	organisation	and	its	operations)	(If
ap	oplicable)								





#### 3 Section 3 – The Project

3.1	Pro	iect	Detai	Is

Kindly provide the address where the proposed project will be implemented Address Post Code

#### 3.1.1 Proposed Initiative

Define the project by describing the proposed work, specifying its main characteristics.

What would the impact on the proposed initiative be without the assistance being applied for through this Funding Programme?

#### 3.2 Project Excellence

Define the project excellence by describing the proposed work, in terms of:

a) How the proposed research enhances the fields highlighted in Annex 1 of the Guidelines. (15 points)

b) How the proposed advancement addresses a gap in a specific sector. (15 points)
Project Impact and Sustainability
Describe how this project will impact your organisation in relation to each of the following:
a) Potential future benefits to the applicant in terms of increased economic or research opportunities or increased international presence and reputation. (15 points)
b) Describe how the project ties in with the relevant National Policies and
Strategies, clearly outlining the contribution of the project towards National Priorities as identified in official documents, such as Malta's realigned official AI Strategy (15 points)

3.3

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	t Quality and Efficiency of Implementation
Identify	the level of management and control systems in place. (10 poir
Ouality	y of Project Participants
	the project participants and provide details on their tecl
	edge and capabilities highlighted in Annex 1 of the Guidelines. F
	sure CVs of all key project participants are included as suppo
	entation to this application. (10 points)
	· · · · · · · · · · · · · · · · · · ·
Demor	nstrate the level of capacity and allocation of resources (huma
	al resources) being dedicated towards the project to ensu
	sful implementation and sustainability (5 points)

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# 3.6

Project Risk Assessment
Please outline the anticipated project timeline, being sure to include all key project activities and demonstrate that adequate contingency periods have been considered. Due consideration will be given to applicants who demonstrate work plan clarity and coherence. Please also refer to Section 5 below and ensure that all project activities are adequately reflected in the Project Gantt Chart. (15 points)
Identify and describe any risks that might impact the implementation of the project and indicate the probability of these risks happening. How do you intend to mitigate these risks? Max O (-5 points lowest score)

# 4 <u>Section 4 – Financial Plan</u>

# 4.1 Financial Plan

Eligible	Costs	Total Eligible (€) (specify €Nil if not applicable)
А	Wages and Salaries for personnel	
В	Procurement and/or rental of equipment, plant and machinery	
С	Procurement of software and/or purchases of software/platform licences	
D	Project overheads (not exceeding 10% of total eligible expenditure of the project)	
Е	VAT charged on eligible expenditure	
	Total Eligible (€)	

#### Financial Plan per project phase<sup>2</sup> 4.2

Phase	Activity	Expected timeline of sub- activity (Start date – end date)	Total Eligible (€)	Total Eligible VAT (€)
			Total (€)	Total (€)

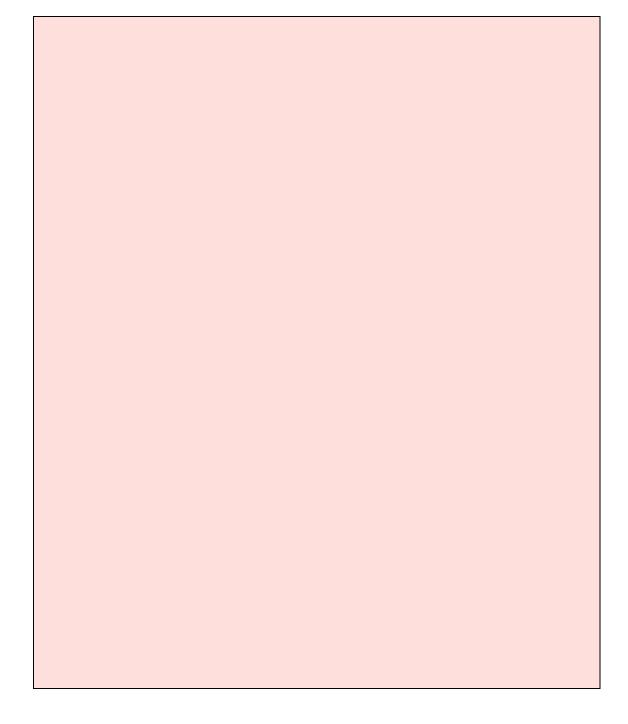
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 $<sup>^{2}</sup>$  Note that the total eligible cost for section 4.1 has to be equal to the total eligible costs for both private enterprises and research institutions under section 4.2

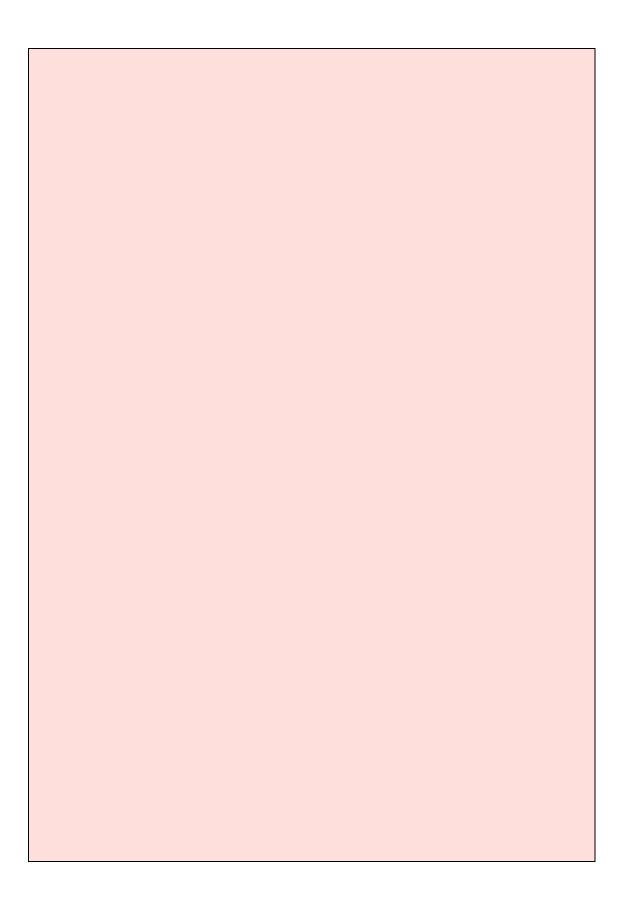
#### Section 5 - Project Timeline 5

#### 5.1 **Gantt Chart**

Insert a Gantt chart clearly showing Project Activities and Sub-activities as indicated in Section 4. (The Gantt Chart is to commence from the effective month of the project implementation and does not necessarily need to commence from the beginning of the calendar year)



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## <u>Section 6 – Additional Information</u> 6

you feel is releva	any additional info nt. Insert the inforr per relevant to this	nation by using th	e section and sub-s

#### 7 Section 7 – Declaration

#### 71 Declaration Form

I declare that I will notify the MDIA of any modification of the approved financial plan and to seek in advance approval from the MDIA should modifications to the approved activities and/or actions be necessary.

I declare that all supplies and services will be procured from external sources unrelated to the Beneficiary.

I declare that I have all the necessary permits in hand.

I declare that the Applicant has not been approved or granted any public funding and will not seek public funding through other National and/or European Union funded initiatives in relation to the activities for which assistance is being requested through this application. This includes schemes under Cohesion Policy and any other European Union instruments or through any other form of Public Funding including schemes administered through National Funds.

The Private Sector Entity and any Research Institution that carries out an economic activity within the meaning of Article 107 TFEU and/or will carry out such an activity as a result of the proposed project, shall ensure compliance with the rules on de minimis aid in line with Commission Regulation (EU) 2023/2831 of 13 December 2023 on the application of Articles 107 and 108 of the Treaty on the Functioning of the European Union to de minimis aid.

I confirm that the Applicant is in compliance with applicable EU and national legislation and administrative requirements, including fulfilment of fiscal obligations and social security contributions.

I declare that the S.L. 343.23 Manpower records (Commencement or Termination of employment) Regulations are being fully adhered to in respect of the Applicant, as outlined in Section 2.1 of this application. I declare that no work has started on the action for which assistance for activities is being requested and work shall only be initiated following the date of the granting of the aid pursuant to the approval of this application and the eventual signing of the Grant Agreement. I declare that the Applicant will maintain operational the project in line with the respective regulations as outlined in the Guidance Notes for this scheme. I can confirm that, to the best of my knowledge, there are no obstacles in continuing the project or sustaining the benefits gained from the project following the end of the scheme.

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I declare that by submitting this application, I am hereby giving my consent for the publication of information related to the enterprise and the project (including budget). I understand that any personal data submitted to the MDIA in relation to this application is processed, in accordance with the Provisions of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) and any amendments thereof.

I acknowledge that a Grant Agreement will be signed on the basis of the information provided in this document and accept that the MDIA will conduct the necessary checks to confirm eligibility in line with the Grant Scheme and relevant Regulations and reserves the right to revoke the grant in cases where variations detected result in the Applicant becoming ineligible.

On behalf of the Applicant, I authorise the MDIA to make enquiries with the Malta Association of Credit Management to carry out the necessary checks in line with the Regulations and Good Governance principles and to make enquiries with competent Authorities, including but not limited to JobsPlus, to verify any information submitted in relation to this application and to conduct checks to establish the eligibility of this application.

I declare that the entries in this Declaration form, the details in the whole Application Form which is being submitted and any other annexes enclosed are, to the best of my knowledge and belief, correct. I understand that should it result otherwise; the project application may be rejected or lead to an eventual recovery of funds.

Authorised Representative of the Applicant	Signature
(Name in Block Letters)	
Date of Declaration	ID No.

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#### 7.2 De minimis Declaration

This declaration shall be filled only when it is applicable to the Applicant.

This declaration shall be submitted as a supporting document with applications for government grants implemented in line with Commission Regulation (EU) 2023/2831 of 13 December 2023 on the application of Articles 107 and 108 of the Treaty on the Functioning of the European Union to de minimis aid

Commission Regulation (EU) 2023/2831 allows a 'single undertaking' to receive an aggregate maximum amount of *de minimis* aid of €300,000 under all de minimis aid measures, over the applicable period of three (3) years. The three-year period is assessed on a rolling basis. For each new grant of *de minimis* aid, the total amount of *de minimis* aid granted in the previous three (3) years needs to be taken into account. As an example, if the declaration is signed on 30 January 2024, the applicant should indicate in the below table, all de minimis aid received from 30 January 2021 onwards. For the purpose of this declaration the term 'single undertaking' shall have the meaning as established in Commission Regulation (EU) 2023/2831.

This maximum threshold would include all State aid granted under this scheme and any other State aid measure granted under the de minimis rule.

The following is an indicative list of the possible forms of State aid:

- Grants from public bodies:
- Loans or loan guarantees at favourable rates;
- Tax benefits:
- Waiving or deferral of fees or interest normally due;
- Marketing and advertising assistance;
- Consultancy, training and other support provided either for free or at a reduced
- Aid for investment in environmental projects or research and development assistance: and
- Purchase, rent, or lease of immovable property at less than market rate.

Potentially, any assistance from a public body may constitute State aid. Should you have any doubts whether any public assistance received is de minimis aid, you should contact the agency or department from which the assistance was received in order to ascertain this or seek legal advice. Any de minimis state aid awarded to you under this project will have to be declared if you apply, or have applied, for any other de minimis aid.

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## DECLARATION

I declare that a comprehensive amount of de minimis aid received to date during the applicable period of three years from date of signature of this declaration is:

Year 2021	Year 2022	Year 2023	Year 2024	TOTAL
€	€	€	€	€

A breakdown of the source, type and amount of all *de minimis* aid received as well as that applied for from any State aid grantor, is presented below. (If no de minimis aid was received kindly mark as Nil).

I am aware that support provided under this Grant constitutes State Aid and I am under an obligation to present a full and accurate disclosure of any relevant information relating to State Aid received in my name and or by my company or by my company shareholders.

I am aware that the scheme administrator will be required to contact any entity that implements any *de minimis* scheme to verify, ascertain and share information as provided in this form to:

- Make sure the information is accurate,
- To ensure that the threshold has not been exceeded, and
- To protect public funds.

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I acknowledge that any *de minimis* aid received in excess of the established threshold will have to be recovered, with interest, from the undertaking receiving the aid.

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By signing this form, I agree that, to the best of my knowledge, all the information contained on the form is complete and is not false.

Name of Undertaking &	
NACE Classification:	
Undertaking's Company No.	
/VAT Registration No.:	
Address:	
Mobile number:	
Telephone number:	
Email Address:	
VAT number:	
Name and Surname of	
representative:	
Identity card number:	
Capacity & Designation of	
Signatory:	
Date:	
Signature:	

# DETAILED INFORMATION CONCERNING APPLICABLE STATE AID UNDER THE *DE MINIMIS* RULE.

(Note: Information should include both State aid received as well as applications for de minimis State aid still pending approval by potential grantors)

This Declaration shall be filled only if it is applicable to the Applicant.

## Section 1 – De Minimis Aid Awarded

Date Awarded	Source/Grantor	Type of State Aid (Name of Measure)	Awarded to	Amount in €

Section 2 – De Minimis Aid requests still pending approval

SCCCIOITZ DC I	viii iii iii ii ii Aid Tege	acsis still periali	ig approvar	
Date	Source/Grantor	Type of State	Awarded to	Amount in €
Awarded		Aid (Name of	AUTH	VATION
		Measure)	AUTH	ORITY

Section 3 – De Minimis Aid Requested in this application

SCCCIOTTS DCT	minini no mana			
Date Awarded	Source/Grantor	Aid (Name of	Awarded to	Amount in €
		Measure)		

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The undersigned hereby authorises MDIA to process the data contained in this form for the purpose stated above and declare that the information on this form and any other information given in support of this application is correct to the best of my knowledge. The applicant acknowledges that the MDIA may request further information and documentation in processing this application.

Date:	
Designation of Signatory:	
Capacity of Signatory:	_
Name, Surname and 1D Card number of Signator	y
Name, Surname and ID Card number of Signator	V:

Signature:



#### Section 8 – Consent to Process Data 8

The signatory of this application confirms that any personal data included in this application form is covered by the appropriate data subject consent as required by the prevalent Data Protection laws and regulations. The consent includes the sharing of data with other government entities where strictly necessary and required by law but also defines the purpose(s) for the processing of data of the data subject/s in line with Article 5, Principles relating to processing of personal data and Article 7 Conditions of Consent of regulation (EU) 2016/679 dated 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (General Data Protection Regulation). Should the data subject withdraw his/ her consent to processing, the MDIA shall be informed immediately. Consequently, MDIA may proceed with processing this data, verifying it with other agencies, and retain such data for the duration required by the applicable national and EU laws and regulations.

By signing this section, I the undersigned hereby expressly consent and authorise MDIA to process the data contained in this form for the purposes stated therein and for the purposes as stated in the Al Applied Research Grant (MAARG) Guidelines.

- modia	
Name, Surname and ID Card number of Signatory:	INNOVATION
Capacity of Signatory:	
Designation of Signatory:	
Date:	
Signature:	

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#### Section 9 - Checklist of Attachments 9

#### **Checklist of Attachments** 9.1

Documents Checklist
Documents Checklist
Project Description*
Froject Description
Declaration Form (Including de minimis Declaration) **
CVs of Key Project Participants*
Partnership Agreement **
Additional Cupporting Decumentation**
Additional Supporting Documentation**

<sup>\*</sup> These items are obligatory

NB: the applicant is kindly requested to name the uploaded files in line with the table above.



**End of Document** 

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<sup>\*\*</sup> These items are to be uploaded only when applicable