# 2nd Travel Voucher Open Call Submission Form

[Read the Call Announcement](https://dih-hero.eu/2nd-dih-hero-travel-voucher-call-for-healthcare-robotics/)

**WELCOME TO THE SECOND DIH-HERO TRAVEL VOUCHER CALL FOR HEALTHCARE ROBOTICS!**

One essential aspect for the development a pan-European network of Digital Innovation Hubs (DIHs) in Healthcare Robotics is the funding for cross-border travelling to stimulate knowledge exchange within the DIH-HERO network. Please note that the **deadline for this call is the 15th of May 2023**, however due to the fact that the travel vouchers will be awarded according to the *“first-come-first-served”*principle, it may be the case that all travel vouchers have already been awarded before the call deadline.

# 1. Summary of eligibility criteria

To be eligible for receiving a cross-border travel voucher within the DIH-HERO project the following criteria will have to be fulfilled:

* 1. The applicant must be a legal entity being an SME from EU and associated countries (Horizon 2020 eligible countries);
	2. The applicant must be working in the field of healthcare and/or robotics;
	3. The proposal must clearly state the purpose of the traveling (e.g. joining a conference organised by DIH-HERO such as the knowledge conference on the 25th of April 2023 in Barcelona / network meeting and/or participate in a DIH-HERO workshop during the ERF 2023 on the 14th to 16th March in Odense and/or visit a Digital Innovation Hub of the DIH-HERO consortium in another country to make use of its services) as well as the objective and expected outcome of the travel;
	4. A third party may not receive more than 300k FSTP for the entire action duration;
	5. The proposal must be written in English;
	6. The proposal must be submitted via the portal before the deadline;
	7. There must not be any conflicts of interests.

For further information and requirements please see [Applicant Guide](https://dih-hero.eu/wp-content/uploads/2023/02/DIH-HERO_TV2-Applicant_Guide-Draft-26.01.23.pdf).

If you fulfil all the criteria given above, please proceed with the next section.

# 2. Summary of required information

The following information will be required to complete the submission form:

* **General Information about the company:** Full legal entity name, type of company, official registration number, place of registration, VAT number, name of managing director, address as well as main contact information.
* **Brief description of the company and its main activity area(s) in regard to robotics/ healthcare (max. 3000 characters)**: Describe the company's current main activities and focus areas the company is working in.
* **Brief description of purpose for cross-border travelling in connection with robotics in healthcare (max. 1200 characters).**
* **Brief description of the impact to be reached through the use of the cross-border travel voucher, when considering the major Healthcare Robotics domains (max. 3000 characters):** (1. Diagnostic Robotics; 2. Interventional Robotics; 3. Rehabilitation Robotics; 4. Robotics supporting Patients; 5. Robotics supporting Healthcare professionals).
* **Results of the EU Self-assessment questionnaire saved in .pdf format.**
* **Signed Declaration of Honour saved in .pdf format.**
* **Signed Consent Form for data processing and storage saved in .pdf format.**

Only one (eligible) proposal submitted per organisation will be taken into consideration for funding.

If you have all information at hand, please proceed with the proposal submission.

# 3. Applicant Information

Please provide the general information about your company.

*Fields marked with a (\*) are required.*

Full name of legal entity\*

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Type of company\*

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*Please state the legal form of the entity.*

Company registration number\*

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*This is the official registration number at which your company is registered in your country (e.g. chamber of commerce).*

Place of registration\*

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VAT Number\*

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Name of managing director\*

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PIC code

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*This is a 9-digit number serving as a unique identifier for organisations (legal entities) participating in EU funding programmes. If you have not participated in an EU funding programme before, please move to the next question.*

Address\*

Street Address\*

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ZIP/Postal Code\*

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City\*

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Country\*

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Company website

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# Applicant’s main contact information

Please provide the contact information of the person who administers the entire process. An account will be created using the provided email address.

*Fields marked with a (\*) are required.*

Name\*

First\*

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Last\*

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Telephone\*

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Email address\*

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*We advise you to use a functional email address that is not tied to a single person.*

# 4. Cross-border Travel Description

Please provide detailed information on how you would use the travel voucher.

*Fields marked with a (\*) are required.*

Brief description of the company and its main activity area(s) in regard to robotics/ healthcare\* (max. 3000 characters)

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*Please describe the company's current main activities and focus areas the company is working in.*

Activity that the Travel Voucher is planned to be used for\*

 [ ]  joining a conference organised by DIH-HERO such as the knowledge conference on the 25th of April 2023 in Barcelona

 [ ]  participate in a DIH-HERO workshop during the ERF 2023 on the 14th to 16th March in Odense

 [ ]  visit a Digital Innovation Hub of the DIH-HERO consortium in another country to make use of its services

Brief description of objective and expected outcome of cross-border travelling in connection with the robotics in healthcare domains\* (max. 3000 characters)

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*(1. Diagnostic Robotics; 2. Interventional Robotics; 3. Rehabilitation Robotics; 4. Robotics supporting Patients; 5. Robotics supporting Healthcare professionals)*

Brief description of the impact to be reached through the use of the cross-border travel voucher, when considering the major Healthcare Robotics domains\* (max. 3000 characters)

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*Please describe the impact of cross-border traveling for the following major application domains in Healthcare Robotics. (1. Diagnostic Robotics; 2. Interventional Robotics; 3. Rehabilitation Robotics; 4. Robotics supporting Patients; 5. Robotics supporting Healthcare professionals)*

Please give a rough estimation on how much budget would be needed to undertake the foreseen travel activities

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# 5. Files

*Please attach the result of the SME-Self-assessment questionnaire, the signed declaration of honour and the signed informed consent form for data processing and storage as pdf to the email you send.*

SME-Self assessment questionnaire (as attachment to the email)

**Declaration of Honour**

By submitting a travel voucher proposal, you and your company declare and confirm the following:

* We have read, understood and will comply with the open call details and requirements.
* All information provided in the DIH-HERO travel voucher proposal submitted by our entity is correct and complete.
* The information on the organisation’s legal status submitted is correct (e.g. type of legal entity, in particular with respect to the SME status).
* We are aware of the fact that we can withdraw the DIH-HERO travel voucher proposal at any time, and we will not be penalised for withdrawing.
* Our company is not in any situation, which would exclude us from receiving financial support for third parties.
* Our company is not under liquidation or in financial difficulty.
* Our company is not subject to a conflict of interest in connection with the financial support for third parties.
* We will inform the DIH-HERO consortium, without delay, of any situation considered a conflict of interest or which could raise a conflict of interest.
* We will process any personal data in compliance with the applicable EU and national law on data protection.

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| Name of entity representative  |  | Date  |  | Signature  |

**Declaration of informed consent for data processing and storage**

☐The undersigned, hereby declares and confirms the following:

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* I have read and understood the open call details and requirements.
* I am aware of the fact that the contact and company details provided in the proposal submission form will be processed by the DIH-HERO consortium for the purposes of the open call for travel voucher under the DIH-HERO innovation action.
* I am aware of the fact that the contact and company details provided will be stored by the DIH-HERO consortium for reporting purposes to the European Commission.
* I am aware of the fact the any personal data obtained in the framework of the DIH-HERO travel voucher call will be processed in compliance with the Regulation (EU) 2016/679 General Data Protection Regulation.

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| Name of entity representative  |  | Date  |  | Signature  |

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| 6. How did you get aware of the current call?\* |
| [ ]  | EC Funding and tender portal |
| [ ]  | DIH-HERO website  |
| [ ]  | DIH-HERO social networks (e.g. LinkedIn) |
| [ ]  | DIH-HERO newsletter |
| [ ]  | DIH-HERO event |
| [ ]  | DIH-HERO flyer or handout |
| [ ]  | Other event - please specify |
| [ ]  | Online search |
| [ ]  | Word of mouth (e.g. another company, innovation office,…) |
| [ ]  | Other -please specify: |

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*Please select the applicable statements (multiple answers possible)*

Has your company already been funded under a previous DIH-HERO open calls?\*

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| [ ] [ ]  | YesNo |

I would like to receive the DIH-HERO newsletter with regular updates concerning the network's events and activities.

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| [ ]  | Yes |

# 7. Consent\*

**[ ]**I agree to the [privacy statement](https://dih-hero.eu/privacy-statement/) of DIH-HERO.

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