

**GUIDE TO COMPLETING THE ONLINE APPLICATION FORMS  
CDEIGENT 2022**

Form name	Form information
SUGUS GENERAL FORM GENERAL GRANT APPLICATION	General information on the beneficiary ENTITY and the applicant (listed as "representative person")
APPLICANT PROJECT OR ACTIVITY	General information on the project
RESEARCHER 1	Information on the applicant researcher
RESEARCHER 2	Information about the principal investigator in the reference group
OTHER PARTICIPANTS	Reference group information, if it does not have current PROMETEO funding
ANNUAL BUDGET	Information on annual budgeted amounts relating to reference group expenditure

**GENERAL GRANT APPLICATION FORM**

**IMPORTANT:**

Section **A DATOS DE LA PERSONA O ENTIDAD SOLICITANTE** must be completed with the details of the entity owning the research centre (beneficiary of the grant).

Sections **B DATOS DE LA PERSONA REPRESENTANTE** and **C NOTIFICACIONES** must be completed with the details of the **researcher who is the subject** of the grant application, since this is carried out on behalf of the entity that owns the research centre.

For applications with an electronic signature, the system automatically loads the data of the applicant researcher in this section.

Required fields are marked with a red asterisk.

**A DATOS DE LA PERSONA O ENTIDAD SOLICITANTE**

NIF / NIE *	PRIMER APELLIDO * <u>RAZÓN SOCIAL *</u>	SEGUNDO APELLIDO	NOMBRE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
NATURALEZA JURÍDICA *			
<input type="text" value="UNIVERSIDADES: ALICANTE, CASTELLÓN, VALENCIA"/>			
			
FILTRO CNAE			
<input type="text"/>			
CNAE			
<input type="text"/>			
			
DOMICILIO (CALLE/PLAZA, NÚMERO Y PUERTA) *			CP *
<input type="text"/>			<input type="text"/>
PROVINCIA *	LOCALIDAD *		
<input type="text" value="Escoge una opción"/>	<input type="text" value="Sin selección"/>		
TELÉFONO *	FAX	CORREO ELECTRÓNICO	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

- NIF and REGISTERED NAME: indicate the Tax ID No. and the name of the UNIVERSITY OR RESEARCH CENTRE. (The NIF/CIF number of the entity can be found on the internet).
- LEGAL NATURE: use the drop-down menu (magnifying glass) to select the type of legal nature that best suits the options.
- ADDRESS and POST CODE: Address and Post Code of the Research Centre.
- PROVINCE and TOWN: select from the drop-down menu.
- TELEPHONE: provide a telephone number for the Research Centre.

**B DATOS DE LA PERSONA REPRESENTANTE**

APELLIDOS *	NOMBRE	NIF / NIE	TELÉFONO
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**C NOTIFICACIONES**

DOMICILIO (CALLE/PLAZA, NÚMERO Y PUERTA)	CP
<input type="text"/>	<input type="text"/>

PROVINCIA	LOCALIDAD
<input type="text" value="Escoge una opción"/>	<input type="text" value="Sin selección"/>

CORREO ELECTRÓNICO \*

☐ Si el solicitante es persona física, acepta la notificación por medios exclusivamente electrónicos.

(\*) A efectos de la práctica de notificaciones electrónicas, la persona interesada deberá disponer de certificación electrónica en los términos previstos en la sede electrónica de la Generalitat (<https://sede.gva.es>)

En todo caso, se estará a lo previsto en la convocatoria correspondiente.

- SURNAMES, FIRST NAME and NIF of the researcher completing the application. If the researcher does not have a Spanish NIF, leave the field blank. It is recommended that an identification document is included in OTHER DOCUMENTS.

- ADDRESS, TOWN, PROVINCE (if applicable) and PC of the researcher completing the application. If the address is outside Spain, in the ADDRESS field the complete address must be entered together with POST CODE, LOCALITY, PROVINCE AND COUNTRY.

EMAIL for sending notifications to the researcher completing the application.

All notifications will be made electronically.

**D LUGAR DE ACTIVIDAD / PRESENTACIÓN DE LA SOLICITUD**

DOMICILIO (CALLE/PLAZA, NÚMERO Y PUERTA) *	CP *
<input type="text"/>	<input type="text"/>

PROVINCIA *	LOCALIDAD *
<input type="text" value="Escoge una opción"/>	<input type="text" value="Sin selección"/>

TELÉFONO \*

Complete with the data for the university or research centre.

**E DATOS BANCARIOS**

Seleccione o indique la cuenta en la que desea que se efectúe el pago.

Recuperar cuenta:

Sin selección

Número de cuenta bancaria (IBAN):

PAÍS Y DC IBAN

ENTIDAD

OFICINA

DC

NÚMERO DE CUENTA

**BANK DETAILS OF THE BENEFICIARY OF THE GRANT (RESEARCH CENTRE), LEAVE BLANK (UNLESS KNOWN).**

Sections F, G, H and I of this form, fill in and accept as appropriate.

Press



After submitting this form, continue with the next "APPLICANT PROJECT OR ACTIVITY".

2A	DATOS ENTIDAD BENEFICIARIA
* TIPO ENTIDAD / PERSONA BENEFICIARIA	<input type="text" value="Selecciona..."/>
* CNAE PARA SICTI	<input type="text" value="Selecciona..."/>
* NIF ENTIDAD BENEFICIARIA	<input type="text"/>
* RAZÓN SOCIAL	<input type="text"/>

Fill in the details of the beneficiary organisation again.

2B	DATOS DEL PROYECTO O ACTIVIDAD SOLICITADA
* NOMBRE	<input type="text"/>
* CÓDIGO ANEP	<input type="text" value="Selecciona..."/>
* CÓDIGO UNESCO	<input type="text" value="Selecciona..."/>
* CÓDIGO NABS	<input type="text" value="Selecciona..."/>
* CÓDIGO FORD	<input type="text" value="Selecciona..."/>
* PALABRAS CLAVE (Indicar un mínimo de 4, separadas por un punto y coma)	<input type="text"/>
* RESUMEN	<input type="text"/>


NAME: name of the research project.

ANEP, UNESCO, NABS, FORD codes: select the corresponding code from the dropdown.

KEYWORDS: indicate a minimum of 4 keywords for the applicant project or activity.

They must be separated by ";" (without spaces).

SUMMARY: write a brief summary of the applicant project or activity (not evaluable, for informational purposes only).


Press **Finaliza**  and move on to the form "RESEARCHER 1".

## RESEARCHER 1 FORM DATA FOR THE APPLICANT RESEARCHER

### IMPORTANT:

- RESEARCHER 1 form, the information refers to the researcher who is completing the application.

Fill in the mandatory data, the doctoral degree and postdoctoral positions. For all other fields, only as appropriate.

Press  and move on to the form "RESEARCHER 2".

## RESEARCHER 2 FORM DETAILS OF THE LEAD RESEARCHER IN THE REFERENCE GROUP

### IMPORTANT:

- The INVESTIGATOR 2 form, the information refers to the principal investigator in the reference group.

Fill in the mandatory data and the other fields, only as appropriate.

In Section 4F DATA ON THE REFERENCE RESEARCH GROUP, if the group has current funding from the PROMETEO programme, indicate the file number; otherwise, tick the box "The group is made up of doctoral research personnel who have a civil servant, statutory or contractual relationship with a research centre in the C. Valenciana...."

4F

DATOS DEL GRUPO INVESTIGADOR DE REFERENCIA

N.º EXPEDIENTE SI EL GRUPO TIENE FINANCIACIÓN VIGENTE DEL PROGRAMA PROMETEO:

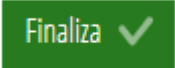
☒ El grupo está conformado por personal investigador doctor que mantiene vinculación funcional, estatutaria o contractual con un centro de investigación de la C. Valenciana, y su composición cumple los requisitos requeridos en las vigentes bases reguladoras de las subvenciones del Programa Prometeo (art. 4, h), apartado 2) de las bases reguladoras

Finish and go to the **"OTHER PARTICIPANTS"** form which will appear only if the reference group does not have current PROMETEO funding.

If the reference group does not have current funding from the PROMETEO programme, do not forget that the following must be provided:

- A report justifying that the group meets, at the time the application is submitted, the requirements for its constitution, in accordance with the current regulatory conditions for the PROMETEO programme.

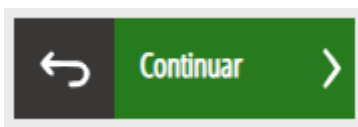
The documentation supporting the circumstances described in the aforementioned report must also be attached.

Press  and move on to the "ANNUAL BUDGET" form.

**"ANNUAL BUDGET" form**

Remember that the maximum amount that can be requested for the expenses of the reference group is 30,000.00 euros for each year.

Press



**Section 3 "Documentation"**

All documentation applicable to the specific circumstances of the applicant and the reference group must be provided, in accordance with the call resolution.

**IMPORTANT:**

ONCE THE ONLINE REGISTRATION OF THE APPLICATION **WITH AN ELECTRONIC SIGNATURE** HAS BEEN COMPLETED, A COPY OF THE RECEIPT GENERATED MUST BE SENT TO THE UNIVERSITY OR RESEARCH CENTRE, SO THAT THE PERSON RESPONSIBLE FOR RESEARCH AT THE INSTITUTION CAN APPROVE THE SUBMISSION OF THE APPLICATION.

IF THE APPLICATION HAS BEEN COMPLETED **WITHOUT AN ELECTRONIC SIGNATURE**, AFTER SENDING IT ELECTRONICALLY, THE RECEIPT GENERATED MUST BE PRINTED OUT AND, IN ORDER FOR IT TO BE VALID, IT MUST BE SIGNED AND REGISTERED IN ANY OF THE PLACES INDICATED IN ARTICLE 16.4 OF LAW 39/15, OF 1 OCTOBER. A COPY OF THE SUPPORTING DOCUMENT MUST ALSO BE SENT TO THE UNIVERSITY OR RESEARCH CENTRE, SO THAT THE PERSON RESPONSIBLE FOR RESEARCH CAN AGREE TO THE SUBMISSION OF THE APPLICATION.