

OFFICE USE ONLY:

Title:
Application number:
Date received:



MEDTECH NAVIGATOR - INNOVATION GRANT APPLICATION FORM

Please complete all sections of the form, return it by e-mail, along with any accompanying material and the **grant funding breakdown sheet** (HEE-CF-020_MTN Grant Appln Funding Breakdown), to: enquiries@medtechnavigator.co.uk. **Please read this form carefully and fill in as requested, keeping answers as brief as possible. Please note the important information for all entrants at the end of this form.**

Data Protection Statement: *The details you provide on this form and subsequently provide to the MedTech NAVIGATOR programme will only be used in connection with services relating to the programme. The MedTech NAVIGATOR programme will input the information you provide onto a computer system and also a paper record for statistical and research purposes. We must protect the public funds we handle and so may use the information you have provided on this form to detect any irregularities. We may also share the information, for the same purposes, with other organisations that handle public funds. To ensure the continuous improvement of our services, we may contact you in the future for your comments about the MedTech NAVIGATOR programme.*

Business Name	
Contact name	
Job title	
Registered address and Postcode	
Trading address and Postcode <i>(If different from above)</i>	
Telephone	
Mobile	
E-mail address	
Business website <i>(If any)</i>	
Nature of business	
Describe principle activities undertaken by business	
Journey stage <i>(Check only one)</i>	<input type="checkbox"/> Startup <i>(trading for less than 12 months)</i> <input type="checkbox"/> Growing <i>(trading for over 12 months)</i>

	<input type="checkbox"/>	Established (<i>trading for over 5 years</i>)
Legal status of the business (<i>Check only one</i>)	<input type="checkbox"/>	Sole trader
	<input type="checkbox"/>	Partnership
	<input type="checkbox"/>	Co. Ltd. by Shares
	<input type="checkbox"/>	Co. Ltd. by Guarantee
	<input type="checkbox"/>	Other:
Company Registration No.		Date of incorporation
VAT number		

In order to receive ERDF funded support you must qualify as an SME	
Does your company employ fewer than 250 people?	<input type="checkbox"/> YES <input type="checkbox"/> NO
No. of Employees: <i>NOTE: Sole traders count as employees, Directors count as employees.</i>	
Is your annual turnover less than 50 million Euros?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Annual Turnover:	
Is your balance sheet total less than 43 million Euros?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Annual Balance Sheet:	
Is more than 25% of your organisation owned by an enterprise that is in itself not an SME?	<input type="checkbox"/> YES <input type="checkbox"/> NO
All data must be related to the last approved accounting period and calculated on an annual basis. In the case of newly established enterprises whose accounts have not been approved, the data to apply shall be derived from a reliable estimate in the course of the financial year.	

Compliance with GBER Article 25	
You are applying for assistance for research and development projects under the European Commission's General Block Exemption Regulations (Article 25). This allows a company to receive aid for industrial research projects up to an aid intensity of 50%. To confirm that you are able to receive assistance from the Project, you must demonstrate compliance with Article 25 as follows:	
Is the aid intensity applied for 50% or less?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Intensity:	
Does the project qualify under the definition of industrial research below: <ul style="list-style-type: none"> industrial research – meaning “the planned research or critical investigation aimed at the acquisition of new knowledge and skills for developing new products, processes or services or for bringing about a significant improvement in existing products, processes or services. It comprises the creation of components parts of complex systems, and may include the construction of prototypes in a laboratory environment or in an environment with 	

simulated interfaces to existing systems as well of pilot lines, when necessary for the industrial research and notably for generic technology validation”.

- YES
 NO

If yes, please explain your answer?

Undertaking In Difficulty - An undertaking is considered to be in difficulty when, without intervention by the State, it will almost certainly be condemned to going out of business in the short or medium term. The definition under State Aid rules that should be used when assessing whether an undertaking constitutes an undertaking in difficulty is set out in the General Block Exemption Regulation (GBER), No 651/2014 . Article 2 para 18.
https://ec.europa.eu/competition/state_aid/legislation/gber_regulation_en.pdf

- By ticking this box, I declare as a representative of the above-named organisation I have read and understood the definition and can confirm the enterprise is not an “undertaking in difficulty”

Do all the eligible costs for the project fall into one or more of the following categories (please tick all that apply)?

- None
 Personnel costs
 Costs of instruments and equipment
 Costs of contractual research, technical knowledge and patents bought or licensed from outside sources
 Additional overheads and other operating expenses

Project Details
1. Title:
2. Project: Please provide a brief description of the project you would like the Innovation Grant to fund? Supporting information can be submitted on <i>no more than 2 extra pages</i> (<i>Word limit 300</i>)
3. Background and Market: Please provide a summary of the current practice, any information on technology or companies operating in this area and any market figures you may have (such as the number of patients that could be treated with this technology for example) (<i>Word limit 300</i>)

<p>4. Benefits: What are the benefits of the proposed product or service over existing products/ solutions? <i>(Word limit 200)</i></p>	
Empty response area for question 4	
<p>5. New Developments: How will this Innovation Grant help your business to develop new products or processes? <i>(Word limit 200)</i></p>	
Empty response area for question 5	
<p>6. What is the total value (excl. VAT) of the project you would like to fund?</p>	Empty response area for question 6
<p>7. What is the value (excl. VAT) of the Innovation Grant you are seeking (max. 50% of total)?</p>	Empty response area for question 7
<p>8. How would you spend the Innovation Grant? We require details on projected costs & outputs. <i>(Word limit 200)</i></p>	
Empty response area for question 8	

9. Clinical or academic collaborators*. Provide contact details of your clinical or academic collaborators. (Word limit 150)	
9a) Describe the process of how and why they were selected. (Word limit 150)	
9b) Description/Specification of services to be procured (Word limit 150)	
9c) What will the service be used for? (Word limit 150)	
9d) Why is this service required? (Word limit 150)	
9e) Net Purchase Value	

* It is expected that you will procure a supplier to deliver your project. This will need to be a knowledge base organisation or research institute or healthcare provider i.e. NHS Trusts, clinical commissioning groups, other public sector research establishments (PSRE) or equivalents (such as consultancies or specialist industry organisations), research and development organisations (RDOs), research and technology organisations (RTOs) higher education and further education institutions. Both public and private sector organisations in these categories can be used. Please contact the Innovation Grants Team if you are not sure whether an organisation/company meet these criteria.

10. How will the Innovation Grant assist you in developing either i) products new to the market and/or ii) products new to your company?
(Word limit 200)

--

Project Start Date	
---------------------------	--

Please note that failure to undertake the project and submit relevant evidence within the stipulated timeframe could lead to the withdrawal of the grant. The latest date that the project needs to be completed and all relevant evidence submitted is 31 July 2022.

Declaration : By returning this form you are agreeing to the following declarations

I understand that the Innovation Grant awarded through this scheme will be for the development of the product or service as put forward in this application. I have read and confirm my organisation's eligibility under the award criteria if I accept this award as detailed below:

- I meet the European Union definition of a small and medium sized enterprise i.e. employ less than 250 full time staff (or equivalent), have an annual turnover of no more than 50 million euros and/or annual balance sheet no more than 43 million euros; and
- I am able to contribute a minimum of 50% to match fund the Innovation Grant; and
- I meet the eligibility guidelines for use of the Innovation Grant; and
- I confirm that the project is compliant with Article 25 of the GBER; and
- I will be providing an original paper invoice from the supplier of my choice; or
- I will be providing a certified copy of an original paper invoice or a signed copy of an electronic invoice. The invoice copies will be signed by a senior manager. If a paper invoice is received, this will be stored until 31st of December 2035; and
- I confirm that I am willing to provide the required information (and photographic proof) to evidence the introduction of a new product or service to my firm or the market; and
- I understand that the collection of personal data is required for the monitoring and evaluation of the project. This is to ensure compliance with the applicable data protection laws; and
- I understand that if this company is later found not to meet the above requirements the company may be required to pay back the value of the aid to the European Union.

Name of Applicant:

Date:

Signature of Applicant:

Important information for all entrants:

1. The MedTech NAVIGATOR has an open call and will accept applications at any point however assessment meetings will be held on a quarterly basis. Please check the website for upcoming deadlines.
2. Shortlisted entrants will be informed prior to the awards committee meeting.
3. Please note only supporting evidence submitted electronically can be accepted.

Equality and diversity		
<p>The European Union, which is part funding the Innovation Grant Programme, requires evidence that the Programme activities are open to all. The information requested is provided on a confidential basis and we will only reveal it in aggregate form. The exception to this is in relation to Programme auditors who will be able to view all the Programme administration records.</p>		
Gender		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say
Date of Birth		
Nationality		
How would you describe your ethnic origin?		
<input type="checkbox"/> White - English / Welsh / Scottish / Northern Irish / British / Irish / Gypsy or Irish Traveller / Any other White background <input type="checkbox"/> Black – African / Caribbean / Any other Black / African / Caribbean background <input type="checkbox"/> Mixed - Multiple ethnic groups / White and Black Caribbean / White and Black African / White and Asian / Any other Mixed / Multiple ethnic background <input type="checkbox"/> Asian - Asian British / Indian / Pakistani / Bangladeshi / Chinese / Any other Asian background <input type="checkbox"/> Other ethnic group – Arab / Any other ethnic group <input type="checkbox"/> Prefer not to say		
Age		
<input type="checkbox"/> Age 16-24 <input type="checkbox"/> Age 25-29 <input type="checkbox"/> Age 30-34 <input type="checkbox"/> Age 35-39	<input type="checkbox"/> Age 40-44 <input type="checkbox"/> Age 45-49 <input type="checkbox"/> Age 50-54 <input type="checkbox"/> Age 55-59	<input type="checkbox"/> Age 60-64 <input type="checkbox"/> Age 65-plus <input type="checkbox"/> Prefer not to say
Are you a disabled person as defined by the Disability Discrimination Act?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say
<p><i>Disability is defined by the Disability Discrimination Act as “a physical or mental impairment, which has a substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities. The disability could be physical, sensory or mental and must be expected to last at least 12 months.</i></p>		