

# CALL FOR PROPOSALS

## New Frontiers in Healthcare Innovation

### Short Course 2020

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#### 1. Proposal leader/s

Name  Surname

Charge

Phone  E-mail

Address

Entity  Web

#### Administrative contact:

Name  Surname

Charge

Phone  E-mail

*If different from the proposal leader:*

Address

Entity  Web

Proposal submission date  mm/dd/yy

#### 2. Other collaborating institutions

Full name and acronym	City	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### 3. Short course program (please select your topic)

**Oncology**                      **Neurology**

#### 4. I'm applying for (please choose only one answer)

**Full track (whole program)**                      **One Session** (several presentations)                      **Single presentation**

Please, in case you choose "Full Track" or "One session" option, fill in the complete form.

#### 5. Proposal title and subtitle (40 words maximum)

**6. Scope and strategic goals of the proposal** (100 words maximum)

**7. Target audience of the proposal** (100 words maximum)

**8. Location**

**Paris**                      **Barcelona**                      **Both are suitable**

In case you have a preference, please specify why:

**9. Beyond state of the art and future challenges on the topics included in the proposal**  
(300 words maximum)

**Further suggested reading** (10 maximum)


**10. Role and experience of the institution in the scope of the proposal** (200 words maximum)

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**11. Results and expected impact of the proposal** (200 words maximum), including the white or review paper

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**12. Expected outstanding messages to take home** (5 minimum)


## ADDITIONAL INFORMATION TO BE FILLED IF THE PROPOSAL INVOLVES A FULL SESSION OR FULL TRACK

**13. Format of the short course** (200 words maximum). Please include info on both the course and the innovation track. Please attach a proposal for the agenda if your proposal exceeds one lecture (eg full session or full day proposal)

**Planned parallel activities** (select as needed)

**Poster session**                      Expected number of posters:

**Round table**                      Title and/or thematic:

**Session/s opened to the general public**                      Title and/or thematic:

**Visit to scientific/technical infrastructures**                      Please specify:

**Demonstration**                      Title and/or thematic:

**Science & art**                      Title and/or thematic:

**Others**                      Please specify:

**Expected total number of attendants**                     

**14. Scientific Committee** (please attach brief CVs or corresponding links)

Name	Surname	Type of collaboration*	Entity, Country	Phone	E-mail

\* Leader / collaborator / promoter / sponsor / other (please specify)

**Description of the organizing team** (100 words maximum)

**15. Proposed lecturers** (please attach brief CVs or corresponding links, 20 maximum)

Name	Surname	Entity	City - Country	Phone	E-mail	Intention*
						Y/N

Total number of lecturers

Ratio of gender balance (50% Women and 50% Men desirable)

\* "Intention" means that the corresponding expert already knows about this proposal and has expressed its **intention to participate**.

**16. Proposed dates** (suggest three dates for Autumn 2020)

Date 1  Date 2  Date 3  mm/dd/yy

Please indicate whether the dates coincide with any event of interest in Barcelona or Paris. If so, please indicate the event, city and country:

**17. List of attached files**

- Program-agenda  
(Including titles of the lectures & lecturers)
- CVs
- Institutional letter of support
- Others

**Please send this form and attached files to: Marta Soler ([msoler@biocat.cat](mailto:msoler@biocat.cat))**

**For further information:** See Rules and Regulations document

**Contacts:** MEDICEN: **Olivier Fontaine**, Head of international & Europe – [ofontaine@medicen.org](mailto:ofontaine@medicen.org)  
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