**Swedish Mining Innovation**

**Internationalization Grant Application 2025**

***Remove the red text****, it is only for guidance.*

*This is your main application to be sent to Lawrence.hooey@swedishmininginnovation.se*

*The project description should be a maximum of six A4 pages (font size 12 pt) excluding the CVs. It may be written in Swedish or English. Please read the call text carefully before filling this form.*

*Contact Lawrence Hooey,* [*Lawrence.hooey@swedishmininginnovation.se*](mailto:Lawrence.hooey@swedishmininginnovation.se)*, 076 129 6602 with any questions. Check* [*www.swedishmininginnovation.se/calls*](http://www.swedishmininginnovation.se/calls) *for updated information on the call.*

**Organization applying:**

**Projekttitel (svenska):**

**Project title (English):**

**Project total budget:**

**Requested funding from Vinnova:**

**Start date:**

**End date:** *(latest possible end date is 15 Nov 2024, otherwise circa 4 weeks after trip)*

**Project Leader:***name, email, telephone*

## Background (circa 1 page)

* *What is the background & current situation?*
* *How does the proposed collaboration address Swedish Mining Innovation’s objectives?*

## Potential (circa 1 to 1.5 pages)

* *What are the specific benefits of developing collaboration? What are short & long term strategic goals for initiating international collaboration? E.g. impact in 2 - 10 years?*
* *How will the proposed collaboration promote gender equality and diversity?*

## Organizations & Personnel *(circa 1-2 pages)*

* *Description & motivation of the organization(s) and individuals applying for the grant*
* *Description of the organizations and key individuals of the potential foreign collaborators*
* *Describe gender and diversity aspects of your organization and delegation.*

**Execution of the internationalization grant** *(circa 1 page)*

* *Describe your specific travel and meeting plans and any preparation work connected to the grant that will be included in the project’s costs.*

**Budget**

*Fill in costs and funding requested. Copy table and if relevant add partner organizations.*

Partner name (copy table and add partners as necessary)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Direct personnel cost (1) | Indirect costs (2) | Other direct costs incl. Travel costs (3) | Costs  1+2+3 |
| Person 1 |  |  |  |  |
| Person 2 |  |  |  |  |
| Person 3 |  |  |  |  |
| Partner Budget: | | | |  |
| Partner Requested Funding: | | | |  |
| Partner Aid intensity: | | | |  |

*Requested funding is maximum 80% of total budget not exceeding 100 000 SEK.*

*Aid intensity = requested funding/total budget\*100*

***See Vinnova General terms and conditions, guide to eligible costs:*** <https://www.vinnova.se/en/apply-for-funding/rules-for-our-funding/terms-and-conditions-for-our-funding/>

Eligible indirect cost calculation for institutes has changed, refer to Vinnova’s General Terms and Conditions for 2025 section 6.1.2.

***CV****: CVs of the participants (max 1 page for each person according to the template provided). Include CV of at least one key person to be met from the foreign organization . Send these as separate files.*