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CfP-TRED-AWP26-TRED-02

**2026 Annual Work Plan**

**EUROfusion Bernard Bigot Researcher Grants**

Application Form

|  |  |
| --- | --- |
| **Applicant Information** | |
| **First Name** |  |
| **Last Name** |  |
| **E-mail Address** |  |
| **Date of PhD Defence\***  (DD/MM/YYYY) |  |
| **Proposing Institute** | |
| **EUROfusion Beneficiary** |  |
| **Affiliation** |  |
| **Country** |  |
| **Proposed Project** | |
| **Title** |  |
| **Mentor(s)** |  |
| **Affiliation of the mentor(s)** |  |

*\* PhD defence date shall be less than 2 years from the submission date of the ERG proposals (between 12 May 2023 and 12 May 2025).*

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# 1. PhD Information

|  |  |
| --- | --- |
| **PhD Thesis** | |
| **PhD Thesis Title** |  |
| If thesis is not written in English, please include title in English here |  |
| **Date of successful PhD Defence**  (DD/MM/YYYY) |  |
| **Awarding Institution** | |
| **Name (in English)** |  |
| **City** |  |
| **Country** |  |

# 2. References

Please include in the application the name, affiliation and contact information for 2-5 references that the applicant has worked with during their research and/or education (within or outside their institution, in the private or public sector). Reference letters are not necessary.

|  |  |
| --- | --- |
| **Reference 1** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Connection** |  |
| **Reference 2** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Connection** |  |
| **Reference 3 - optional** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Connection** |  |
| **Reference 4 - optional** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Connection** |  |
| **Reference 5 - optional** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Connection** |  |

# 3. ERG project proposal

## 3.1 Description of the research project and its objectives

This section shall explain the importance of the project for fusion research and for the candidate’s training/development. (Maximum length: 2 pages. The reference list is not included in the page limit.)

## 3.2. List of milestones and deliverables

This section shall list the project milestones, deliverables, GANTT-chart of the project. As the grant can start between 1st January 2026 and 1st July 2026, we recommend keeping the timeline flexible rather than planning with a concrete date, month, calendar quarter or year. This is to avoid later revisions if the activities need to shift because of an earlier or later start than initially foreseen.

(Maximum length: 2 pages).

## 3.3 Individual work plan including training activities

Please include a description of the work plan and training activities. Please identify key risks to the project and specify mitigating actions as well.

(Maximum length: 2 pages)

## 3.4 Actions involving specific expenditure

A description of actions involving specific expenditure, along with justification how these expenditures contribute to the achievement of the scientific goals of the work plan. **Please ensure consistency between this section and the actions listed in the Financial Summary.**

(Maximum length: 1-page additional text written by the candidate in addition to the tables)

**Conferences**

Maximum two conferences will be funded during the grant period. Location of the conference might not be available at the time of the application. In this case, please make a best estimate for the location and cost of the conference participation. Please note: Which two conferences you attend during the grant period can be changed with justification, but once the grant application was endorsed by the General Assembly the associated cost cannot be increased.

|  |  |
| --- | --- |
| **Conference 1** | |
| **Conference title** |  |
| **Destination** |  |
| **Year** |  |
| **Mission length** |  |
| **Justification** |  |
| **Conference 2** | |
| **Conference title** |  |
| **Destination** |  |
| **Year** |  |
| **Mission length** |  |
| **Justification** |  |
| **Comment on the conferences** |  |

**Workshops and training courses**

Create a separate table for each workshop and training course. Update the table header accordingly. We encourage you to use the available budget for training courses aligned with your proposed project.

|  |  |
| --- | --- |
| **Workshop / Training** | |
| **Topic** |  |
| **Destination** |  |
| **Year** |  |
| **Mission length** |  |
| **Justification** |  |

**Missions**

We encourage you to use the mission budget to connect with European and international teams to collaborate with them on your project. Please create a separate table for each mission. Multiple trips to the same destination and topic may go into one table. For missions over 2 weeks, please provide a supporting letter from the host facility and check the relevant check box.

The table related to the Induction week in Garching shall be removed for candidates from IPP-Garching as there is no travel cost involved.

|  |  |
| --- | --- |
| **Mission 1** | |
| **Topic** | EUROfusion Grants induction week |
| **Destination** | EUROfusion Headquarters in Garching, Germany |
| **Year** | 2026 |
| **Mission length** | 5 days |
| **Justification** | Participation in the EUROfusion Grants induction week which is a mandatory event. |

|  |  |
| --- | --- |
| **Mission 2** | |
| **Topic** |  |
| **Destination** |  |
| **Year** |  |
| **Mission length** |  |
| **If ≥ 2 weeks** | A supporting letter of the hosting facility is available and provided with the application (Required for missions ≥ 2 weeks, optional for missions < 2 weeks) |
| **Justification** |  |

**Equipment and hardware**

Please specify the equipment you are planning to procure. Otherwise put N/A (not applicable). For equipment only depreciation costs can be declared for the percentage of time the equipment is used for the grant programme. Therefore, in the financial summary, please indicate for each year the estimated amount of depreciation only (direct costs), not total purchase costs. Depreciation cost is calculated based on the local rules of your institute. Please consult your administration when filling out the financial summary.

|  |  |
| --- | --- |
| **Equipment / Hardware** | |
| **Type** |  |
| **Justification** |  |

**Other Goods and Services (OGS)**

Please specify other goods and services you are planning to procure. Otherwise put N/A (not applicable). For OGS, full costs are eligible.

|  |  |
| --- | --- |
| **Other Goods and Services** | |
| **Type** |  |
| **Justification** |  |

## 3.5 Mentoring

Plan of mentoring organised by the EUROfusion Consortium Member or its Affiliated Entity. (Maximum length: 1 page text in addition to the table.)

|  |  |
| --- | --- |
| **Mentor 1** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |
| **Mentor 2 - Optional** | |
| **Full Name** |  |
| **Affiliation** |  |
| **E-mail Address** |  |

## 3.6 Experience of the supporting institutions

Experience in the topic of the proposed research project of the EUROfusion Consortium Member or its Affiliated Entity and the organisation of the mentoring in this proposed grant.

(Maximum length: 1 page)

# 4. Data Protection

## 4.1 Candidate’s consent

With reference to all the personal data provided by me in this application, I declare that I have read and understood the personal data protection policy described (ex art. 13 GDPR) in the Guideline for Applicants to the Call CfP-TRED-AWP26-TRED-02 and that I consent to the processing of such data for the purposes and within the terms indicated therein.

Date:

Name of the candidate (in capital letters):

Signature

## 4.2 Mentor(s)’ consent

With reference to all the personal data provided by me in this application, I declare that I have read and understood the personal data protection policy described (ex art. 13 GDPR) in the Guideline for Applicants to the Call CfP-TRED-AWP26-TRED-02 and that I consent to the processing of such data for the purposes and within the terms indicated therein.

Date:

Name of Mentor 1 (in capital letters):

Signature

*In case of two mentors*

Date:

Name of Mentor 2 (in capital letters):

Signature