

Proposal Submission Forms



Level 1
Collaborative Project

A1

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| Proposal Number | | Proposal Acronym | GUIDEKEEPER |
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GENERAL INFORMATION ON THE PROPOSAL

| | | | |
|--|---|------------------------|--------------------|
| Proposal Title (max. 200 char.) | <i>A High Altitude Long Endurance Aircraft System (HALEAS) to Detect, to Guide and Control a Pilot-Free Aircraft Flight with Total Automation</i> | | |
| Duration in months | 36 | Call (part) identifier | FP7-AAT-2008-RTD-1 |
| Activity code(s) most relevant to your topic | AAT-2008-1.4.01 | AAT-2008-1.4.02 | |
| Keyword code 3 | Risk management; Environmental protection; Astrophysics | | |
| Keyword code 4 | Global monitoring; System design; RF design | | |
| Keyword code 5 | Communications technology; Regional innovation; Resources management | | |
| Free keywords | New and enhanced technologies and services | | |

Abstract (max. 2000 char.)

GUIDEKEEPER aims at providing Europe: 1. Developing HAP (High Altitude Platform)-Tower Airport Concept to provide complete ATC (Air Traffic Control) and ATM (Air Traffic Management) monitoring using GCU (Ground Control Unit); 2. Developing Technology for automatic guidance and control of pilot free aircraft flight through HAP sensors; 3. Developing methodology and tools for new approach to guide and control flight vehicle with total automation including: a) a long endurance high-altitude unmanned aircraft equipped with Synthetic Aperture Radar (SAR), Moving Target Indicator (MTI) and surveillance radar to detect, to track, and to guide and control a pilot-free aircraft flight along predicted trajectory; b) High rate data link transmitter and 28-31 GHz relay for deploying telecom backhaul in the sky in case of emergency, based on CAPANINA Stratospheric Broadband (www.capanina.org) project; c) Airport/ground command centre system for controlling landing/taking off a pilot-free aircraft flight; d) and system connected in real time with existing airport ATC data (track) to exclude identified targets and avoid false alarm, either ATM or Security related; e) Ground station where information is collected from the GUIDEKEEPER, processed, fused/distributed for Air Transport Control and Management contexts. Five operation modes will be analyzed in depth in order to produce adequate/cost effective processing tools for: 1) Air-to-Air Detection and Tracking of Aircraft; 2) Air-to-Air Guidance and Control of pilot-free aircraft flight; 3) Air-to-Air Commands to Land a pilot-free aircraft flight; 4) Improving Air Flight Management by GUIDEKEEPER, and 5) Airport-GUIDEKEEPER Flight Management Task Sharing. The processing tools developed in the project will be integrated in an air transport management system. The advantages of this new methodology will be demonstrated by means of air-to-air tests for the first, second and third modes of operation, and by air-to-field-to-air tests for the 2 other modes of operation.

GUIDEKEEPER benefits: 1) of the experience to be gathered in large aircraft project of network of command and control to be conducted (Watchkeeper); 2) of the USE HAAS project (EC Contract No516081 www.usehaas.org) on "Developing Strategic Research Agenda for the High Altitude Aircraft Sector", where CTI, RMA, IAI and DLR coordinate and participate in the project; 3) to exploit results of ATENAA, MINERVAA, NEWSKY (www.atenaa.org; www.minervaa.org; www.newsky-fp6.eu) projects dealing with communication backbone; 4) to exploit results of the FAA funded NextGen project (www.faa.gov/news/fact_story.cfm?news.Id=8145) dealing with ADS-B (Automatic Dependent Surveillance Broadcast, and Action 17 of EUROCONTROL/FAA MoC dealing with future aircraft communication.

For a proposal to be considered as complete, all questions must be answered. If a field is not applicable to you, please enter -.

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7th Framework Programme for
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Development and Demonstration

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Collaborative Projects

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| Proposal Number | | Proposal Acronym | GUIDEKEEPER |
|-----------------|--|------------------|-------------|

| INFORMATION ON PARTICIPANTS | | | | | |
|---|--|---|---------------|--------------|-----|
| Participant number | 1 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | Royal Military Academy – Patrimony | | | | |
| Organisation short name | RMA | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | B-1000 | Cedex | - |
| Street name and number | Avenue de la Renaissance 30 | | | | |
| Town | Brussels | | Country | Belgium | |
| Internet homepage | www.rma.ac.be | | | | |
| Activity Type HE, RES, IND, OTH | HE | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | GOV |
| If Legal Status "PRC", specify | - | | | | |
| Is the organization a Small or Medium-Sized Enterprise (SME)? | YES/NO | | | NO | |
| Are there dependencies between the organisation and (an) other participant(s) ? | YES/NO | | | NO | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | Hendrick | | First name(s) | Patrick | |
| Title | Prof. | Sex: Female=F, Male=M | | | M |
| Department/Faculty/Institute/ Laboratory name | Mechanics Department | | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | - | Cedex | - |
| Street name and number | - | | | | |
| Town | - | | Country | - | |
| Phone 1 | +3226502656 | | Phone 2 | +32478549606 | |
| e-mail | Patrick.Hendrick@rma.ac.be | | Fax | +3226502710 | |

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|---|--|-----|---|
| Previously submitted similar proposals or signed contracts? | YES/NO | YES | S |
| If yes, programme name(s) and year | ESPRIT1998-IST2000-IST2001, USEHAAS (Acronym) 2004, 516081 | | |
| If yes, proposal number(s) or contract number | ESPRIT 29870 HOPE, IST-2000-25044 SMART, IST-2001-37532 ISIS, 511590 | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|---|---|---|---------------|---------------|-----|
| Participant number | 2 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | CTI - Creative Technologies Israel Ltd. | | | | |
| Organisation short name | CTI | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | IL-93856 | Cedex | - |
| Street name and number | 49 Dagan Street | | | | |
| Town | Jerusalem | | Country | Israel | |
| Internet homepage | www.cti-creative.com ; www.usehaas.org | | | | |
| Activity Type HE, RES, IND, OTH | OTH | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | PRC |
| If Legal Status "PRC", specify | LTD | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | | | | YES/NO | YES |
| Are there dependencies between the organisation and (an) other participant(s) ? | | | | YES/NO | NO |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | Lavie | | First name(s) | Arie | |
| Title | Prof. | Sex: Female=F, Male=M | | | M |
| Department/Faculty/Institute/ Laboratory name | - | | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | 93856 | Cedex | - |
| Street name and number | 49 Dagan Street | | | | |
| Town | Jerusalem | | Country | Israel | |
| Phone 1 | 972-2-6452086 | | Phone 2 | 972-52-674402 | |
| e-mail | arlavie@zahav.net.il | | Fax | 972-2-6452489 | |

| | | | |
|---|--|-----|---|
| Previously submitted similar proposals or signed contracts? | YES/NO | YES | S |
| If yes, programme name(s) and year | 1) USE HAAS (acronym), 2004; 2) TELASHIP (acronym), 2003 | | |
| If yes, proposal number(s) or contract number | 1) Contract 516081; 2) 511590 | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|--|--|---|------------------|-------|---|
| Participant number | 3 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | DEUTSCHES ZENTRUM FUER LUFT-UND RAUMFAHRT E.V. | | | | |
| Organisation short name | DLR | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | 51147 | Cedex | - |
| Street name and number | LINDER HOEHE | | | | |
| Town | KOELN | Country | GERMANY | | |
| Internet homepage | www.dlr.de | | | | |
| Activity Type HE, RES, IND, OTH | RES | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | PRC | | |
| If Legal Status "PRC", specify | NON COMMERCIAL | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | YES/NO | | | NO | |
| Are there dependencies between the organisation and (an)other participant(s) ? | YES/NO | | | NO | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | SUESS | First name(s) | HELMUT | | |
| Title | Prof. | Sex: Female=F, Male=M | M | | |
| Department/Faculty/Institute/ Laboratory name | MICROWAVE AND RADAR INSTITUTE | | | | |
| Address (if different from above) | | | | | |
| PO Box | 1116 | Postal Code | 82230 | Cedex | - |
| Street name and number | - | | | | |
| Town | WESSLING | Country | GERMANY | | |
| Phone 1 | +49 8153 28 2372 | Phone 2 | +49 8153 28 2371 | | |
| e-mail | helmut.suess@dlr.de | Fax | +49 8153 28 1135 | | |

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| Previously submitted similar proposals or signed contracts? | YES/NO | YES | S |
| If yes, programme name(s) and year | IST 2000 – 25044 (Project SMART), USEHAAS (Acronym) 2004 | | |
| If yes, proposal number(s) or contract number | 516081 | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|---|---|---|------------------|-------|---|
| Participant number | 4 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | TEKEVER, S.A. | | | | |
| Organisation short name | TEK | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | 1050-186 | Cedex | - |
| Street name and number | Av. Da República 35 – 3º | | | | |
| Town | Lisboa | Country | Portugal | | |
| Internet homepage | http://www.tekever.com | | | | |
| Activity Type HE, RES, IND, OTH | IND | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | PRC | | |
| If Legal Status "PRC", specify | S.A. | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | YES/NO | | | YES | |
| Are there dependencies between the organisation and (an) other participant(s) ? | YES/NO | | | NO | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | Oliveira | First name(s) | André | | |
| Title | Mr. | Sex: Female=F, Male=M | M | | |
| Department/Faculty/Institute/Laboratory name | R&T | | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | | Cedex | - |
| Street name and number | | | | | |
| Town | | Country | | | |
| Phone 1 | +351 213 304 300 | Phone 2 | +351 938 358 565 | | |
| e-mail | andre.oliveira@tekever.com | Fax | +351 213 304 301 | | |

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| Previously submitted similar proposals or signed contracts? | YES/NO | NO |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|--|--|---|---------------|---------|--------|
| Participant number | 5 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | Israel Aerospace Industries Ltd. | | | | |
| Organisation short name | IAI | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | 70100 | Cedex | - |
| Street name and number | Ben Gurion International Airport | | | | |
| Town | | | | Country | Israel |
| Internet homepage | www.iai.co.il | | | | |
| Activity Type HE, RES, IND, OTH | IND | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | PUC |
| If Legal Status "PRC", specify | LTD | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | YES/NO | | | | NO |
| Are there dependencies between the organisation and (an)other participant(s) ? | YES/NO | | | | NO |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | Chemla | First name(s) | Meir | | |
| Title | Mr. | Sex: Female=F, Male=M | M | | |
| Department/Faculty/Institute/ Laboratory name | MALAT DIVISION | | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | - | Cedex | - |
| Street name and number | - | | | | |
| Town | - | Country | - | | |
| Phone 1 | 972-3-9356996 | Phone 2 | 972-52-609802 | | |
| e-mail | mchemla@iai.co.il | Fax | 972-3-9357349 | | |

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| Previously submitted similar proposals or signed contracts? | YES/NO | YES | S |
| If yes, programme name(s) and year | USE HAAS (Acronym), 2005 | | |
| If yes, proposal number(s) or contract number | Contract No 516081 | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|---|--|---|--------------------------------|----------------|-----|
| Participant number | 6 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | STRATXX Holding AG | | | | |
| Organisation short name | STRATXX | | | | |
| Legal address | | | | | |
| PO Box | | Postal Code | CH-6318 | Cedex | - |
| Street name and number | | Underbachstrasse 7 | | | |
| Town | Walchwill | | Country | Switzerland | |
| Internet homepage | | | | | |
| Activity Type HE, RES, IND, OTH | IND | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | PRC |
| If Legal Status "PRC", specify | | AG | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | | | | YES/NO | YES |
| Are there dependencies between the organisation and (an) other participant(s) ? | | | | YES/NO | NO |
| If yes, participant number | | - | If yes, participant short name | | - |
| Character of dependence SG, CLS, CLB | | | - | | |
| If yes, participant number | | - | If yes, participant short name | | - |
| Character of dependence SG, CLS, CLB | | | - | | |
| If yes, participant number | | - | If yes, participant short name | | - |
| Character of dependence SG, CLS, CLB | | | - | | |
| Person in charge | | | | | |
| Name | Kamal | | First name(s) | Alavi | |
| Title | Mr. | Sex: Female=F, Male=M | | | M |
| Department/Faculty/Institute/ Laboratory name | | Engineering Department | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | - | Cedex | - |
| Street name and number | | - | | | |
| Town | - | | Country | - | |
| Phone 1 | 41-41-7582101 | | Phone 2 | 33-6-8817-1340 | |
| e-mail | k.alavi@stratxx.com | | Fax | 41-41-7580651 | |

| | | |
|---|--------|--------|
| Previously submitted similar proposals or signed contracts? | YES/NO | N O |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

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| INFORMATION ON PARTICIPANTS | | | |
|--|--|---|----------------|
| Participant number | 7 | | |
| Participant organisation | | | |
| Organisation legal name | University of Naples "Frederico II" | | |
| Organisation short name | UNINA | | |
| Legal address | | | |
| PO Box | | Postal Code | |
| | | Cedex | - |
| Street name and number | | | |
| Town | Naples | Country | Italy |
| Internet homepage | www.unina.com | | |
| Activity Type HE, RES, IND, OTH | RES | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | GOV |
| If Legal Status "PRC", specify | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | | | YES/NO NO |
| Are there dependencies between the organisation and (an)other participant(s) ? | | | YES/NO NO |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | | - | |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | | - | |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | | - | |
| Person in charge | | | |
| Name | Antonio | First name(s) | Moccia |
| Title | Prof. | Sex: Female=F, Male=M | M |
| Department/Faculty/Institute/ Laboratory name | | Aerospace Engineering Department | |
| Address (if different from above) | | | |
| PO Box | - | Postal Code | - |
| | | Cedex | - |
| Street name and number | | | |
| Town | - | Country | - |
| Phone 1 | 39-081-7682158 | Phone 2 | - |
| e-mail | antonia.moccia@unina.it | Fax | 39-081-7682160 |

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| Previously submitted similar proposals or signed contracts? | YES/NO | YES S |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|--|--------------------------------------|---|-----------|-----------------|-----|
| Participant number | 8 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | TSD – Techno System developments srl | | | | |
| Organisation short name | TSD | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | 80078 | Cedex | - |
| Street name and number | Zona Industriale San Martino 35 | | | | |
| Town | Pozzuoli (Naples) | | Country | Italy | |
| Internet homepage | www.tsdev.it | | | | |
| Activity Type HE, RES, IND, OTH | IND | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | PRC |
| If Legal Status "PRC", specify | srl | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | YES/NO | | | YES | |
| Are there dependencies between the organisation and (an)other participant(s) ? | YES/NO | | | NO | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | - | | | | |
| Person in charge | | | | | |
| Name | Monti | First name(s) | Francesco | | |
| Title | Ing. | Sex: Female=F, Male=M | M | | |
| Department/Faculty/Institute/ Laboratory name | | | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | 80078 | Cedex | - |
| Street name and number | Zona Industriale San Martino 35 | | | | |
| Town | Pozzuoli (Naples) | | Country | Italy | |
| Phone 1 | +39 081 5263575 | | Phone 2 | +39 081 5263830 | |
| e-mail | fmonti@tsdev.it | | Fax | +39 081 5262701 | |

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| Previously submitted similar proposals or signed contracts? | YES/NO | N O |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

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| INFORMATION ON PARTICIPANTS | | | | | |
|--|--|---|---------------|-------------|-----|
| Participant number | 9 | | | | |
| Participant organisation | | | | | |
| Organisation legal name | INTEGRASYS S.A. | | | | |
| Organisation short name | INTEGRASYS | | | | |
| Legal address | | | | | |
| PO Box | - | Postal Code | 28232 | Cedex | - |
| Street name and number | ESQUILO, 1 | | | | |
| Town | LAS ROZAS (MADRID) | | Country | SPAIN | |
| Internet homepage | www.integrasys-sa.com | | | | |
| Activity Type HE, RES, IND, OTH | IND | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | | | PRC |
| If Legal Status "PRC", specify | SA | | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | | | | YES/NO | YES |
| Are there dependencies between the organisation and (an)other participant(s) ? | | | | YES/NO | NO |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | | - | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | | - | | | |
| If yes, participant number | - | If yes, participant short name | - | | |
| Character of dependence SG, CLS, CLB | | - | | | |
| Person in charge | | | | | |
| Name | Sánchez Peiro | | First name(s) | Juan Carlos | |
| Title | Mr. | Sex: Female=F, Male=M | | | M |
| Department/Faculty/Institute/ Laboratory name | | General Manager | | | |
| Address (if different from above) | | | | | |
| PO Box | - | Postal Code | | Cedex | - |
| Street name and number | | | | | |
| Town | | | Country | | |
| Phone 1 | | | Phone 2 | - | |
| e-mail | | | Fax | | |

| | | |
|---|--------|----|
| Previously submitted similar proposals or signed contracts? | YES/NO | NO |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

For a proposal to be considered as complete, all questions must be answered. If a field is not applicable to you, please enter -.

Proposal Submission Forms

EUROPEAN COMMISSION
7th Framework Programme for
Research, Technological
Development and Demonstration

Level 1
Collaborative Projects

A2

| | | | |
|-----------------|--|------------------|-------------|
| Proposal Number | | Proposal Acronym | GUIDEKEEPER |
|-----------------|--|------------------|-------------|

| INFORMATION ON PARTICIPANTS | | | |
|---|------------------------------------|---|------------------|
| Participant number | 10 | | |
| Participant organisation | | | |
| Organisation legal name | Ecole Normale Supérieure de Cachan | | |
| Organisation short name | ENSC | | |
| Legal address | | | |
| PO Box | | Postal Code | 94235 Cedex - |
| Street name and number | 61 avenue du Président Wilson | | |
| Town | Cachan | Country | FRANCE |
| Internet homepage | www.satie.ens-cachan.fr | | |
| Activity Type HE, RES, IND, OTH | RES | Legal Status GOV, INO, JRC, PUC, PRC, EEIG, PNP | GOV |
| If Legal Status "PRC", specify | | | |
| Is the organisation a Small or Medium-Sized Enterprise (SME)? | | | YES/NO NO |
| Are there dependencies between the organisation and (an) other participant(s) ? | | | YES/NO NO |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | - | | |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | - | | |
| If yes, participant number | - | If yes, participant short name | - |
| Character of dependence SG, CLS, CLB | - | | |
| Person in charge | | | |
| Name | Allano | First name(s) | Sylvain |
| Title | Pr. | Sex: Female=F, Male=M | M |
| Department/Faculty/Institute/ Laboratory name | SATIE/Institut Farman | | |
| Address (if different from above) | | | |
| PO Box | - | Postal Code | - Cedex - |
| Street name and number | - | | |
| Town | - | Country | - |
| Phone 1 | 33-1-47-40-21-16 | Phone 2 | 33-6-22-13-77-51 |
| e-mail | allano@satie.ens-cachan.fr | Fax | 33-1-47-40-21-99 |

| | | |
|---|--------|--------|
| Previously submitted similar proposals or signed contracts? | YES/NO | N O |
| If yes, programme name(s) and year | | |
| If yes, proposal number(s) or contract number | | |

For a proposal to be considered as complete, all questions must be answered. If a field is not applicable to you, please enter -.

