Call to support **research projects**

**on the social impact of COVID-19 LL20-1**

***This document must only be completed in English***

|  |  |
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| **(Enter the title of your proposal here)** | **Document B Contact details** |

UNIVERSITY OR RESEARCH CENTRE
to which the project leader is affiliated

Name or business name:

Tax code (NIF):

Autonomous community:

Postcode:

**RESEARCH TEAM**

**Project leader – Applicant 1**

First name:

Surname:

DNI/NIE/Passport:

Post or position:

Email:

Mobile phone:

**Applicant 2**

First name:

Surname:

Post or position:

Email:

**Applicant 3**

First name:

Surname:

Post or position:

Email:

**Applicant *n***

First name:

Surname:

Post or position:

Email: