

Proposal Submission Forms



EUROPEAN COMMISSION

6th Framework Programme for
Research, Technological
Development and Demonstration

Integrated Project

A2

Proposal Number ¹		Proposal Acronym ²	MENTAL CHANGE
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Information on Participants				
Participant number ²⁶				
Participant organisation				
Organisation legal name ¹¹		DIPARTIMENTO DI SOCIOLOGIA E COMUNICAZIONE DELL'UNIVERSITA' DI ROMA LA SAPIENZA		
Organisation short name ¹²		UOR		
Legal address				
PO Box ¹³		Postal Code ¹³	00198	Cedex ¹³
Street name and number ¹³		VIA SALARIA 113I		
Town ¹³	ROME	Country ¹⁴	ITALY	
Internet homepage		http://www.uniroma1.it		
Activity Type HE, RES, IND, OTH ¹⁵		HE	Legal Status GOV, INO, JRC, PUC, PRC, EEIG ¹⁷ , PNP ¹⁶ GOV	
If Legal Status "PRC", specify ¹⁸				
Is the organisation a Small or Medium-Sized Enterprise (SME)? ¹⁹				YES/NO NO
Are there dependencies between the organisation and (an)other participant(s) ? ²⁰				YES/NO NO
If yes, participant number		If yes, participant short name		
Character of dependence SG, CLS, CLB ²¹				
If yes, participant number		If yes, participant short name		
Character of dependence SG, CLS, CLB ²¹				
If yes, participant number		If yes, participant short name		
Character of dependence SG, CLS, CLB ²¹				
Person in charge²²				
Name	Di Nicola	First name(s)	Patrizio	
Title ²³	Prof.	Sex: Female=F, Male=M ²⁴	M	
Department/Faculty/Institute/ Laboratory name		Dipartimento di Sociologia e Comunicazione		
Address (if different from above)				
PO Box ¹³		Postal Code ¹³	Cedex ¹³	
Street name and number ¹³				
Town ¹³		Country ¹⁴	FRANCE	
Phone 1 ²⁵	+39 06 49918456	Phone 2 ²⁵		
e-mail	patrizio.dinicola@uniroma1.it	Fax ²⁵	+39-06-43 59 90 78	

Previously submitted similar proposals or signed contracts? ¹⁰		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 -.