## SHORT-TERM SCIENTIFIC MISSIONS

### General points

The Management Committee (MC) is responsible for approving candidates to receive support based on the applications received. The process and the justification for the choice must be recorded in the MCM minutes in addition, obviously, to the opinion of the Committee.
The researcher is responsible for obtaining the agreement of the host organisation, for applying to the MC for approval and for providing the necessary records relating to the mission. These records include travel documents and a report on the mission.
The financial contribution is subject to constraints and guidelines. It is hoped that as many different people as possible will be able to take advantage of the support available. The average contribution for a mission will normally be less than 1500 ECU and this should be seen as the normal ceiling, with any exceptions needing special justification. The costs associated with a mission must not in any event exceed the limits set in the general guidelines used by the Commission for the reimbursement of travel by experts.

### Applications for support

1. Information on the scheme, including the relevant application forms, will be distributed to all the MC members for forward distribution to all those active within the Action who may be interested in participating.
2. Research workers seeking support should submit to the MC, through the Chairperson / Secretary, a completed *Application Form* accompanied by a completed *Acceptance by the Host* from the host institution.
3. Copies of the forms will then be distributed to an agreed *ad hoc* group of 5-7 MC members.
4. Each member of the *ad hoc* group will separately review each application using the *Evaluation Form*.
5. Based on the individual comments received on the returned forms, a proposal will be prepared for the full MC.
6. Approval by the MC of the selected applicants may be achieved either through a written procedure or during an MC meeting.
7. In the case of a written procedure, a particular time limit may be stipulated within which MC members must indicate their opinion on the proposal. In the event that an MC member does not reply within the delay given then a positive opinion may be presumed.
8. The applicant and the host will be notified of the outcome, including any modification to the request.
9. The results of the evaluation will be presented to the MC at their next meeting. The procedure and results of the consultation will be detailed in the minutes of the meeting.
10. Successful applicants for travel support may request in advance 70% of the estimated costs for the mission. The estimated costs must not exceed those allowed under the Commission rules for reimbursement for travel and subsistence of experts. The advance should be paid a reasonable time before the mission.
11. The researcher must submit a mission report and a financial statement with copies of the expenses within 4 weeks of the mission. Failure to do so should result in a request for repayment of the advance. After verification the balance should be paid promptly.

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### Guide to applicants

**Objectives**
The aim of the Short-Term Scientific Mission should be to contribute to the realisation of the objective of the Memorandum of Understanding (MoU) of the COST Action concerned.
These Missions shall strengthen the existing networks by allowing scientists to go to a laboratory in another COST country to learn a new technique or to make measurements using instruments and/or methods not available in their own laboratory.
**Eligibility**
The applicant must be a national of one of the COST countries and work in a laboratory in a COST country having signed the MoU of the Action concerned. This laboratory should be actively participating in the COST Action. Undergraduates may not be considered.
**Mobility**
The applicant must travel to another COST country where he or she is not normally resident.
**Host Institution**
The host institution can be public or private, but must be in a COST country having signed the MoU and must be participating in the COST Action.
**Duration**
Short-Term Scientific Missions - minimum 3 days, maximum 1 month - will be available within the duration of the respective COST Action.
Applications may be submitted at any time to the Management Committee of the COST Action, bearing in mind that the Management Committees meet normally three times a year.
**Evaluation**
Evaluation of the requests will be carried out by the Management Committee of the COST Action taking into account the scientific value of the proposed work as well as the reasonableness of the estimated costs requested.
Incomplete applications will not be considered.
**Finance**
The total funds requested should not exceed 1500 ECU per mission.
Payment will be made as follows:

- 70% of the estimated costs in advance of the mission
- 30% upon submission of a detailed statement of the use of the allocated funds, which must be returned not later than 4 weeks after the end of the mission.

The final statement must include the necessary vouchers, in particular the original tickets used for travel, and a report of the mission duly refereed by the host institution.
Travel will be paid using either (1) Economy class airfare if the single journey exceeds 400 km (APEX tickets recommended), (2) train fare, or (3) car travel up to a sum not exceeding the train fare.
For the period of the mission neither the COST Action Management Committee nor the Commission is in any way an employer and recipients must make their own arrangements for all health, social, personal security and pension matters.
**Destination of Application Forms**
Requests should be send to the Chairperson or Secretary of the Management Committee of the COST Action.

**SHORT-TERM SCIENTIFIC MISSIONS**

**Application Form**

**For the Attention of the Management Committee of COST Action 259:**
*Please complete using a printer or in BLOCK CAPITALS*
**From**
Family Name:
Given Name(s):
Organisation:
Address:

Postcode:
Country:
Telephone:
Fax:
E-mail:
Bank Account No.:
Account Holder:
Bank:

Working Group:

I apply for the period from _____________ to ___________________
Academic qualifications (Title, Degrees):

Nationality:
Date of birth:
Present employer (if different from organisation above):

I enclose a *Work Plan* and the *Acceptance by the Host Institution* duly signed and a detailed estimate of the funding requested.
I would be pleased to provide further information if requested to do so.
I, the undersigned, declare that the information provided above and enclosed is, to the best of my knowledge, accurate and complete.

Signature:

Date:

**SHORT-TERM SCIENTIFIC MISSIONS**

**Acceptance by the Host Institution**

This declaration is to be completed by the Head of the Host Research Group and returned to the grant applicant.
*Please complete using a printer or in BLOCK CAPITALS*
Name:
Organisation:
Address:

Postcode:
Country:
Telephone:
Fax:
E-mail:

I, the undersigned, am willing to receive ______________________________ in my institution on a short-term scientific mission in the framework of the COST Action 259 to undertake the work described in the attached work plan from __________ to ___________.

Signature:

Date:

**SHORT-TERM SCIENTIFIC MISSIONS**

**Evaluation Form for Applications**

COST Action 259
Proposing Applicant: ____________________________________________
Host Institute: ____________________________________________
Evaluator: ____________________________________________

**GENERAL CRITERIA**

| **ITEM** | **1** | **2** | **3** | **COMMENT** |
|---|---|---|---|---|
| * Scientific quality of the application<br>Technical merit<br>Originality<br>Feasibility of approach | | | | |
| * Compatibility with the COST Action<br>Compatibility with the MoU<br>Add value to Action<br>Extend network of contacts<br>Timeframe of application and of Action<br>Complementarity | | | | |
| * Realism of the Application<br>Feasibility within timeframe proposed<br>Justification of the finance requested | | | | |
| * Application of Results<br>Impact for Action<br>Dissemination of results | | | | |
| **Overall Evaluation** | | | | |

| | |
|---|---|
| Recommend to Accept | |
| Recommend to Reject | |
| Recommend to Modify | |

Date:

Signature:

Note: Please indicate in one of the three boxes (1=weak, 2=average, 3=good) your evaluation of the application for each of the main criteria. The subdivisions indicate only some of the factors to be considered and do not require an individual evaluation. If your recommendation is "modify" then please explain how.