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| AO Start-up Grant Application |

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| Before you submit your grant application |

Please check our website

[**www.aofoundation.org**](http://www.aofoundation.org)

Before beginning:

* Use the latest grant application form which can be downloaded from our website.
* Please review the guidelines before beginning.
* Applications which do not conform completely to the website application format or which ignore or fail to comply with any part of the guidelines may be returned to the applicant and will not be considered unless resubmitted by the deadline.

Please check that

* your application does not exceed the allowed number of pages/word/characters as indicated on the following pages
* all amounts must be converted to Swiss Francs
* your calculations are correct and all totals are entered
* we need written and signed confirmation signed by the head of your institution if you applied for salary support for yourself or a co-investigator
* we need written and signed confirmation for collaboration with the AO Research Institute, Davos (Switzerland) and AO Clinical Investigation & Documentation Department (CID). Only required if you plan a cooperation with one of these departments.

Please be reminded that

The project duration is strictly limited to 24 months. Be realistic with your timetable as no-cost extensions will not be approved. If an approved study is not completed by the defined end date, the final installment of 20% will not be paid.

Please submit your application

* as an unprotected Word-document to [mirjam.bucher@aofoundation.org](mailto:mirjam.bucher@aofoundation.org)

You will receive

* a confirmation e-mail within a week regarding receipt of the application. Should you not receive the notification within one week, please contact: [mirjam.bucher@aofoundation.org](mailto:mirjam.bucher@aofoundation.org)
* a notification email on the decision approximately six months after the respective deadline

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| AO Start-up Grant Application |

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| Part 1: General information |

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| **Type** **of application** | New application  Continuation of project no | | |
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| **Project title**  Do not exceed 100 characters | Click here to enter text. | | |
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| **Total amount requested in Swiss Francs** | CHF Click here to enter text. | | |
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| **Duration / Start date** | Duration: Choose an item. | Start date: Click here to enter text. | |
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| **Type of research** | Choose an item. | | |
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| **AO Clinical Divisions** | Please select one particular area in which your grant application best fits:  AOCMF AOSpine AOTrauma AOVET Others/General | | |
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| **Research field** | Research field of the proposal  Select here: | | |
|  |  | | |
| **High level keywords**  Select one or two keywords from the dropdown list | Choose an item. | | Choose an item. |
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| **Detailed keywords**  Select at least 3 keywords from the 'List of keywords' describing the topic of your proposal | Click here to enter text.  Click here to enter text. | | Click here to enter text.  Click here to enter text. |
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| **Principal investigator**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |
|  | Young researcher as described in our guidelines:  yes  no | | |
| **Co-Investigator 1**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |
| **Co-Investigator 2**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |
| **Co-Investigator 3**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |
| **Co-Investigator 4**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |
| **Co-Investigator 5**  Surname / First name / Age in years  Academic degrees  Current employing institution | Click here to enter text.  Click here to enter text.  Click here to enter text. | | |

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| Young applicant’s career focus |

**Please indicate how this grant, if funded, will help your career desires and focus. Outline your expected career path and how this aligns with the AO Start-Up Grant program guidelines.**

Do not exceed 250 words.

Click here to enter text.

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| Part 2: Personal data |

**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Principal investigator**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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| **Education / Training**  Begin with baccalaureate or other professional education and include postdoctoral training | | | |
| Institution and location | Degree | Year (date) | Field of study |
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| **Position and employment** | | |
| Year (date) | Position | Institution and location |
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| **Other experience and professional membership** | | |
| Year (date) | Position | Institution and location |
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| **Honors** | |
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**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Co-investigator 1**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Co-investigator 2**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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| **Education / Training**  Begin with baccalaureate or other professional education and include postdoctoral training | | | |
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| **Position and employment** | | |
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| **Other experience and professional membership** | | |
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| **Honors** | |
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**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Co-investigator 3**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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| **Education / Training**  Begin with baccalaureate or other professional education and include postdoctoral training | | | |
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| **Other experience and professional membership** | | |
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| **Honors** | |
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**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Co- investigator 4**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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| **Education / Training**  Begin with baccalaureate or other professional education and include postdoctoral training | | | |
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| **Other experience and professional membership** | | |
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| **Honors** | |
| Year (date) | Description |
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**Do not exceed 1 page per applicant and do not send a separate CV**

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| **Co- investigator 5**  Surname / First name / Age in years  Academic degrees  Present position and title  Institute / Department  University / Institution  Office address (please provide full postal address)  e-mail | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

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| **Education / Training**  Begin with baccalaureate or other professional education and include postdoctoral training | | | |
| Institution and location | Degree | Year (date) | Field of study |
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| **Position and employment** | | |
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| **Other experience and professional membership** | | |
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| **Honors** | |
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| Part 3: Details of the proposal |

**This part must not exceed 10 pages / Do not change the font (Arial 10).**

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| 1 Project abstract |

**Please summarize the whole project. The abstract must be suitable to stand alone as, in case of approval, it will be published on our website.**

**Do not exceed 2500 characters including spaces.**

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| 2 Outline the problem |

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| 3 State of the art in this field |

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| 4 Past research of the applicant in this field |

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| 5 Open questions, hypothesis, aim of the project |

**5.1 Open questions**

**5.2 Hypotheses**

5.3 What are the aims you want to reach with your study?

5.3.1 Anticipated results for year 1

Describe in a few sentences the anticipated results and goals for the first year

5.3.2 Anticipated results for year 2 (if applicable)

Describe in a few sentences the anticipated results and goals for the second period not exceeding 6 months

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| 6 Detailed research plan |

6.1 Study subjects, specimen or materials

6.2 Effect and outcome variables

6.3 Methods for taking measurements

6.4 Methods for data management and analysis (including biostatistical check)

6.5 Estimation of sample size and power

**6.6 Animal model**

If an in vivo animal model is used in the planned research work, please describe the model in detail. The description should include: anesthesia protocols, treatment protocols, pain management, surgical techniques, post-operative care, criteria for removal from the study if necessary, and euthanasia protocols.

AAALAC accreditation (Association for assessment and accreditation of Laboratory Animal Care International)   
www.aaalac.org

Please indicate whether the institution (main applicant and co-applicants) is AAALAC accredited and specify in which institution the animal research will be carried out. If the institution is not AAALAC accredited, please detail what agency and standards are used to oversee animal use and care.

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| 7 Relevance of the project |

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| 8 Time schedule |

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| 9 Relevant literature |

9.1 By the investigators

9.2 By other authors

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| Part 4: Other support |

**If any other funding has been, is or may be received for this study, its source and amount should be declared here.**

Is this application currently being submitted elsewhere?

Yes  No

If yes, to which organizations, and by what date is a decision expected?

Click here to enter text.

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| **Submitted to** | **Amount requested** | **Decision expected** |
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Please give details of how this affects the study and declare the budget. If there could be a duplication of funding received from the AO Foundation a revised budget should be submitted.

Has this or a similar application been submitted elsewhere over the past year?

If yes, please give details, and explain how this does not overlap with your current application to the AO Foundation.

Click here to enter text.

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| **Submitted to** | **Decision** | **Amount requested** | **Amount approved** |
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| Part 5: Finances — Budget for entire proposed project period |

**Please note that the amounts must be converted to Swiss Francs.  
For salary requests for principal and co-investigators please check the AO Start-up Grants Guidelines.**

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| **Personnel** | | |  |  |  |  |  |
| Surname / First name | Academic qualification | Effort in % | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total cost for personnel** |  |  |  |  |  |  |  |

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| **Material** |  |  |  |  |  |
| Devices, equipment, extension to existing equipment, etc. | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total cost for material** |  |  |  |  |  |

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| **Supplies** |  |  |  |  |  |
| Itemize below | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total cost for supplies** |  |  |  |  |  |

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| **Rental of equipment** |  |  |  |  |  |
| Itemize below | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total cost for rental equipment** |  |  |  |  |  |

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| **Project related travel** |  |  |  |  |  |
| Itemize below | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total cost for travel** |  |  |  |  |  |

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| **Other project related costs** |  |  |  |  |  |
| Itemize below | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total for project related costs** |  |  |  |  |  |

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| **Conferences** |  |  |  |  |  |
| Itemize below | **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total costs for conferences** |  |  |  |  |  |

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| **Total costs** |  |  |  |  |  |
| **Year1** |  | **Year2** |  | **Total** |
| Original currency | **Swiss Francs** | Original currency | **Swiss Francs** | **Swiss Francs** |
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| **Total costs** |  |  |  |  |  |

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| Part 6: Existing resources |

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| **Personnel** |  |
| Name, First name and role in the study | Percentage of project participation |
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| **Equipment**  Describe below |
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| **Infrastructure**  Describe below |
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| **Financial sources**  Describe below | |
| Currency and amount | Organization |
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