

TASC-RestoreMed - Open Call
Type A: Community-Led Actions (CLA)

Annex 2.1 A

Application form at the F6S platform

This document is for information ONLY
The Application form must be filled directly in the F6S platform
Submission deadline: 27 May 2026, 17:00 CET

The project TASC-RestoreMed (Technical assistance and support to communities of actors for the Mission Restore our Ocean and Waters by 2030 for the Mediterranean basin), under grand agreement No 101217661 has received funding from the European Union's Horizon Europe research and innovation programme.

Views and opinions expressed are however those of the authors only and do not necessarily reflect those of the European Union or the European Climate, Infrastructure and Environment Executive Agency (CINEA). Neither the European Union nor the granting authority can be held responsible for them.

This proposal form has the following mandatory sections:

Section 1: Proposal identification

Section 2: Applicants information

Section 3: Proposal information

Section 4: Requirements to join TASC-RESTOREMED funding programme

Section 5: Additional questions

The following documents MUST be reviewed when preparing your proposal (available at: <https://tascrestoremmed.eu/open-call>)

> Annex 1 Guide for Applicants

> Annex 1.1A Catalogue_Type A-Community-Led Actions

> Annex 2A Proposal Template_Type A-CLA

> Annex 2.1A Application form at the F6S platform_Type A: Community-Led Actions (CLA) (current form)

> Annex 3A Sub-Grant Agreement_Type A_ CLA

> Annex 4A Consortium Declaration of Honour (template)_Type A_CLA

> Annex 5A SME Declaration (template)_Type A_CLA

> Annex 6A Bank account information (template)_Type A_ CLA

[Note Annex 2.1A Application form at the F6S platform_Type A: Community-Led Actions (CLA) MUST be completed and uploaded within the form available on the F6S page]

Please be informed that failure to provide the required information/documentation will result in disqualification.

Good luck!

I SECTION 1: PROPOSAL IDENTIFICATION I

1. Proposal title *: _____

2. Proposal Acronym*: _____

3. Proposal abstract*: _____

Please provide a detailed summary of your proposal. This summary may be used for promotional purposes and made public. Maximum length 1500 characters (including spaces).

I SECTION 2: APPLICANT(S) INFORMATION I

According to Annex 1 - Guidelines for applicants Type A Community-Led Actions will finance applications form consortiums of minimum 2 entities – one organisation must serve as Lead applicant (Consortium Lead). Please fill in the information below accordingly for each applicant (if applicable). Please take into consideration that in case of a single entity application, in this type of projects (CLA) - the application will be rejected.

Applicant 1 – Lead

4. A1 - Organisation/Entity Name*

Please provide the official legal name of the organization/entity

5. A1 - Type of organisation* (checkboxes)

☐ Startup

☐ SME

- ☐ NGO
- ☐ Research organization
- ☐ Education institution
- ☐ University
- ☐ School
- ☐ Association
- ☐ Foundation
- ☐ Regional and local authorities
- ☐ Other _____ (Please define)

6. A1 - VAT number*

7. A1 - Country*

8. A1 – Website

9. A1 - Name of main contact person*

This will be the main contact person TASC-RestoreMed project will interact with to provide results and request any information.

10. A1 - Contact person's role/position in the company/organisation*

11. A1 - Email address*

This will be the primary email to contact the consortium.

Applicant 2

12. A2 - Organisation/Entity Name*

Please provide the official legal name of the organization/entity

13. A2 - Type of applicant* (checkboxes)

- ☐ Startup
- ☐ SME
- ☐ NGO
- ☐ Research organization
- ☐ Education institution
- ☐ University
- ☐ School
- ☐ Association
- ☐ Foundation
- ☐ Regional and local authorities
- ☐ Other ____ (Please define)

14. A2 - VAT number*

15. A2 - Country*

16. A2 – Website

17. A2 - Name of main contact person*

18. A2 - Contact person's role/position in the company/organisation*

19. A2 - Email address*

20. ADDITIONAL APPLICANT(s) - if applicable

If your Consortium has more than two (2) partners, you MUST provide for each additional partner (e.g. A3 stand for Applicant #3, A4, Applicant #4 etc.) the following data using this order:

- 1) A3 - ORGANIZATION/ENTITY NAME (Please provide the official legal name of the organization/entity):
- 2) A3- TYPE OF APPLICANT (e.g. SME, NGO, Association, Research Organisation, Other - define):
- 3) A3- VAT NUMBER:
- 4) A3 - COUNTRY (officially registered):
- 5) A3 WEBSITE (if applicable):
- 6) A3 - NAME OF MAIN CONTACT PERSON:
- 7) A3- THE MAIN CONTACT PERSON'S ROLE/POSITION IN THE COMPANY/ORGANISATION
- 8) A3 EMAIL ADDRESS:

If you have more than 3 partners in this Consortium, you **MUST** repeat this set of questions for Partner 4 using A4, and continue same logic for additional partners.

21. **Mediterranean Partner availability:** At least one of the applicants is legally registered in at least one of the eligible Mediterranean Sea Basin countries listed in Annex 1. Guide for applicants, section 3.1.2.*

- ☐ YES
- Please provide the name of the Country(ies)

I SECTION 3: PROPOSAL INFORMATION I

22. Main MO Pilar Addressed: Clearly state the main Mission Ocean Pillar that you wish to Apply* (You can select only 1 option)

- ☐ 1: Protect and restore marine and freshwater ecosystems and biodiversity
- ☐ 2: Prevent and eliminate pollution of our oceans, seas and waters
- ☐ 3: Make the sustainable blue economy carbon-neutral and circular

23. Potential additional MO Pillars Addressed: Clearly state any additional Mission Ocean Pillar that your project involves

- ☐ 1: Protect and restore marine and freshwater ecosystems and biodiversity
- ☐ 2: Prevent and eliminate pollution of our oceans, seas and waters
- ☐ 3: Make the sustainable blue economy carbon-neutral and circular

24. **Activity location:** All activities included in the proposal are to be implemented in the Mediterranean Basin.*

- ☐ YES
- Please provide the name of the Location(s)

25. Upload here a pdf of filled in *Annex 2A Proposal Template_Type A-CLA*

The respective Annex is available at: <https://tascrestoremmed.eu/open-call>

Before submitting check if you have:

- (1) Respected the formatting requirements, including the page limit
- (2) Provided information for all the required sections

Proposals using another template will be disqualified. Any pages exceeding the defined limit will not be evaluated. Failure to meet the requirements will lead to proposal disqualification.

I SECTION 4: REQUIREMENTS TO JOIN TASC-RESTOREMED FUNDING PROGRAMME I

26. I accept all conditions of TASC-RestoreMed Open Call Type A: Community-Led Actions (CLA)*
☐ YES

The conditions and all relevant documents to participate in TASC-RestoreMed Open Call Type A: Community-Led Actions (CLA) are available at: <https://tascrestoremmed.eu/open-call>. By selecting "YES" you agree to the conditions described therein.

27. DECLARATION OF HONOUR: I CONFIRM that I accept all conditions in Annex 4A Consortium Declaration of Honour (template)_Type A_CLA and information contained therein and that it will be provided signed and stamped (by all Consortium members) once selected*
☐ YES

28. SME DECLARATION (For SMEs): I confirm that the company(ies) I represent is/are a valid SME(s), following established EU rules, which validity is declared by a signed and stamped declaration provided once selected.*
☐ YES

29. I CONFIRM that all information provided in this proposal is true and correct.*
☐ YES

30. I ACCEPT that the information provided and submitted in this proposal can be shared by F6S with the TASC-RestoreMed consortium and appointed external evaluators for the purposes of managing the open call.*
☐ YES

I SECTION 5: ADDITIONAL QUESTIONS I

31. How did you hear about TASC-RestoreMed - Open Call?*

- ☐ TASC-RestoreMed website
☐ F6S website
☐ TASC-RestoreMed social media
☐ LinkedIn
☐ EC communications
☐ Event / meeting / info day
☐ Others ____ (Please specify)

32. I am interested in being contacted about future funding opportunities.*
☐ YES
☐ NO