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| **Budget neutral extension** |

**1A. Project number:**

**1B. Full project title:**

**2. Contact details of main applicant (‘project coordinator’)**

- Name of contact person, title(s):

- Name of organisation:

- Telephone:

- E-mail:

**3. Start date (dd-mm-yyyy):**

**4A. Current end date (dd-mm-yyyy):**

*If you already received approval for extension please indicate, and mention the approved end date.*

**4B. Requested extension in months (months):**

**4C. Requested new end date (dd-mm-yyyy):**

**4D. Total duration of the project (months):**

**5A. Rationale extension**

*Please indicate if and why the delay in the project is COVID-19 related*

**5B. Rationale extension**

*Please describe:*

1. *Which milestones and deliverables, as indicated in the approved project application, cannot be reached without extra extension*
2. *The change in end goal of the project compared to the expected end goal in the approved application, if extension cannot be granted*
3. *The changes in the impact of the approved project application (if applicable scientific, societal and/or economic)*

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| **Statement by project coordinator** |

Main applicants must submit this TKI-LSH Project Recovery application form by e-mail to

[stavenuiter@health-holland.com](mailto:stavenuiter@health-holland.com) in case PPP Allowance for your project is received directly from Health ~Holland. For any questions regarding submission, please send an e-mail to [stavenuiter@health-holland.com](mailto:stavenuiter@health-holland.com) or call +31 (0)6 39 00 09 02. For Project Coordinators receiving PPP Allowance via their own institution or health foundation, please contact and report to them.

Please tick the boxes where applicable:

By submitting this form, I declare that I have completed this form truthfully and I declare that I have informed the correct official(s) of my employing organisation and the consortium partner(s) of this submission.

Name:

Place:

Date:

Please note: Information provided in relation to this application will be treated confidentially by Health~Holland. Health~Holland has to inform the Netherlands Enterprise Agency (RVO.nl) on the participants of the project and the in cash and in kind contribution of private partners, in order to claim the requested PPP Allowance. RVO.nl will also treat this information confidentially.