smart living lab

Martin Gonzenbach

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PARTICIPANTS INFORMATION							
Name of the coach: (if already available)							
School: Type of studies:	☐ EPFL ☐ Bachelor	☐ HEIA-FR ☐ Master	□ UNIFR □ PhD				
	P	ROJECT INFORMATION					
Project title Project description							
Research Area(s):	□ Well-being and b□ Energy systems	ehaviors					
Start date		End d	ate				
Have you applied for anot	ther grant for the same	e project?	yes □ no □				
If so, what amount have received?	e you	Where have yo applied?	u				







FINANCIAL REQUEST								
Initial fund CHF 1'000 Additional financial support nee	eded	⊠ □ yes	□ no					
Requested amount in CHF (max CHF 4'000/project)								
Please declare your expected costs (max. CHF 4'000/project)								
The grant amount is to be train account								
CONTACT INFORMATION								
Professional address		Tel.		Ī				
i Totessional address		Fax						
		E-mail						
Annex								
Place and date	5	Signature						
Application is to be sent by e-ma	ail to: incubator@smart Att: Mr. Martin Go smart living lab Halle Bleue Passage du Card 1700 Fribourg Tel. +41 21 693 5	onzenbach linal 13b						





