## inDemand Community - Application Form

inDemand project is looking for 12 regions interested to uptake the created and validated cocreational model for the health sector.

Regions have to apply through a Consortium integrated by three different stakeholders: one challenger, one funder and one supporter.

The community is open to receive more committed parties, but these 12 regions will benefit from a closer mentoring and a tailored support throughout the project's life cycle.

Please fill in the following short questionnaire before 31 August 2018.

5 1	3
*Obligatorio	
1. Name of the Region *	
2. Country *	
Main contact details	
Provide the main contact details of the Consortium	
3. First name *	_
4. Last name *	
5. Organisation name *	
6. Job Title *	
7. Email Address *	
8. Telephone (00+countrycode+telephone) *	

## Description of the regional consortium

Regions have to apply through a Consortium integrated by three different stakeholders: one challenger, one funder and one supporter. In this section you will be able to provide details of the stakeholders from your Consortium.

#### 1. CHALLENGER

The CHALLENGER organisation is usually a public entity from the healthcare sector (e.g. Regional Healthcare Provider) that will identify the unmet needs - challenges - and will co-create the solution with companies.

9.	Legal entity type *
10.	Website (English version if available) *
11.	Description *
12.	Previous experience in challenge (need) identification *
13.	Commitment to identify challenges. Upload a letter of commitment from top management * Archivos enviados:
Co	ntact details of the Challenger
14.	First Name *
15.	Last Name *
16.	Position *
17.	Email Address *

## 2. FUNDER ORGANISATION

The role of FUNDER should be represented by a funder organisation that should launch the competitive call to select the best company and will also provide the economic support.

18.	Legal entity type *	
19.	Website (English version if available) *	
20.	Description *	
21.	Previous experience in procurement of innov	ation *
22.	How do your Smart Specialisation strategy prinDemand? *	iorities support your participation in
23.	Describe the available innovation funds that of your region, the date of the calls, etc. Describe structural Funds. *	
24	Commitment to use own funds. Unload a lette	or of commitment from ton monogons at *

# Contact details of the Funder

Archivos enviados:

25.	25. First Name *	
26.	26. Last Name *	
27.	27. Position *	
28.	28. Email Address *	
3.	. SUPPORTER ORGANISATION	
The sele	he SUPPORTER organisation will be an intermediate organelected companies to optimize the business model, access	nization that will deliver support to the to funding and commercialization.
29.	29. Legal entity type *	
30.	80. Website (English version if available) *	
31.	31. Description *	
32.	32. Previous experience in business support (eg. busine commercialization), in particular for digital health *	ess modelling, private funding,
33.	33. Commitment to use own resources. Upload a letter of Archivos enviados:	of commitment from top management *
Co	Contact details of the Supporter	

34.	First Name *	
35.	Last Name *	
36.	Position *	
37.	Email Address *	
Ex	pectations	
38.	What do you aim to achieve with the Mirror remake use of this experience in your region? \	gion status? How will you be able to furthe Vhat impact do you expect to achieve? *
30	Explain relationships or previous collaboration	une among mombore. Evamplos on
55.	collaboration are recommended *	nis among members. Examples on
40.	Any other information that shows interest or	commitment to implement the inDemand
	model in the short future? Are there/would th	ere be other stakeholders involved? *

## **Data Protection**

#### 41. Data protection \*

We do hereby inform you that the data you have sent us by way of this electronic form shall be included in the information systems of TicBiomed, Tecnologías de la Información de la Región de Murcia. Said communication shall be used to deal with your request, as well as to send any information which may be of interest to you about our activity. By indicating your data, and pursuant to the stipulations of article 6 of the L.O.P.D., you are granting your clear consent to TicBiomed, Tecnologías de la Información de la Región de Murcia to process, in compliance with the purposes mentioned in the previous paragraph above, the personal data provided. Notwithstanding, at any time you may exercise your rights of access, rectification, objection and, where applicable, cancellation, at the address: CEEIM, Campus Universitario de Espinardo, 7, Espinardo, 30100 MURCIA or at the e-mail: <a href="Lopd@ticbiomed.org">Lopd@ticbiomed.org</a> Selecciona todos los que correspondan.

I do hereby read and accept the da	ata protection policy
Otro:	

### Thank you very much!

Please remember that the call closes on the 31st of August 2018 and selected regions will be informed through the contact person identified in this application form.

Con la tecnología de

