**JUSTIFICATION OF REQUESTED AMOUNTS:**

To complete this section, check the Bases Concurso de Proyectos FONDECYT de Iniciación 2018 and Application Instructions.

(Must use letter size, Verdana size 10 or similar)**.**

**TECHNICAL/SUPPORT STAFF**

For each technical/Support staff who will perform proposal-related tasks complete the information requested in the table below and justify the amounts requested. Below the following table, provide a precise tasks description of each staff member mention in the table.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Technical and/or Support Staff** | **Number of Hours** | | **Number of Months** | | | **Salary** |
| **Week** | **Month** | **Year 1** | **Year 2** | **Year 3** |
| **Staff 1** |  |  |  |  |  |  |
| **Staff 2** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Technical/Support Staff Tasks:

Staff 1

Staff 2

**STIPENDS FOR THESES STUDENTS SUPPORT:**

Indicate the Undergraduate and Graduate theses you intend to fund through this proposal.

**PROPOSAL TRAVEL:**

Trips are funded solely for activities directly related with the proposal development, presentation of results and outreach activities to the society. Only **Economy airfares** are accepted. Indicate tentative destinations, purpose and number of days for each trip.Review the funding reference table of travel expenses at www.conicyt.cl/fondecyt.

**FOREIGN TRAVEL:** Annually, only one international trip is allowed for scientific meetings or conferences.

|  |  |  |
| --- | --- | --- |
|  | **Destination** |  |
|  | **No. of Days** |
| **Year 1** |  |  |
| **Year 2** |  |  |
| **Year 3** |  |  |

**Domestic travel:**

|  |  |  |
| --- | --- | --- |
|  | **Destination** |  |
|  | **No. of Days** |
| **Year 1** |  |  |
| **Year 2** |  |  |
| **Year 3** |  |  |

**INTERNATIONAL COOPERATION FOREIGN TRAVEL:**

Justify your funding request to carry out international cooperation activities in Chile. Only once or twice along the project timeline, you can request annual international cooperation regardless of the project duration.

|  |  |
| --- | --- |
|  | **N°. of days stay** |
|  |
| **Year 1** |  |
| **Year 2** |  |
| **Year 3** |  |

**OPERATIONAL EXPENSES:**

In the following table indicate the estimated annual cost of one or more items necessary for a successful development of the proposal. Insert or delete as many rows as needed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Subítem** | **Amount (1000 CLP$)** | | |
| **Year 1** | **Year 2** | **Year 3** |
| Office Supplies |  |  |  |
| Computing-related items |  |  |  |
| Reagents and other laboratory non-durable materials |  |  |  |
| Books purchases, scientific journals, subscription fees and memberships |  |  |  |
| Scientific meetings registration fees |  |  |  |
| Payments for services |  |  |  |
| Hiring of occasional auxiliary personnel |  |  |  |
| Journal publishing costs |  |  |  |
| Software and licenses |  |  |  |
| Survey(s) Cost |  |  |  |
| Focus Group(s) Cost |  |  |  |
| Outreach to society activities |  |  |  |
| Rent a car, freight payment |  |  |  |
| Purchase of office furniture and/or minor conditioning of physical space |  |  |  |
| Other: specify |  |  |  |
|  |  |  |  |
| **TOTAL:** |  |  |  |

**EQUIPMENT**:

Justify the need to have available the requested equipment as related to the goals and/or proposed methodologies. Describe the technical specifications for each ítem. The funding requested must include transportation, insurance, VAT and import taxes costs.

The last year of the project is not allowed to request equipment.

**Tablets, Printers, Notebooks, Desktop Computers, among others, must be included in this section.**

**Justification of your request:**