**EULAR PARE Knowledge Transfer Programme (KTP)  
Application Form**

Please discuss your project ideas and agree on the aims and objectives of your project with the potential teaching organisation before submitting your application to the EULAR secretariat. If you need help from previous successful projects, please refer to the [EULAR website](https://www.eular.org/pare_knowledge_transfer_progamme.cfm) or contact EULAR PARE at pare@eular.org

Your application has to be in English with all parts sufficiently filled in, so the jury can work with the information. If something is not clearly explained, the jury will ask for further information. You will need to send an answer by the date given by the EULAR secretariat.

**Before submitting your application**, please discuss your project aim and application with a member of the KTP Working Group and email your request to pare@eular.org. You will also have access to the recording of the KTP Webinar which will be available on the EULAR PARE Events Platform from 25 March. We are here to help you, don’t hesitate to reach out.

**Application timeline**

* **Deadline for applications: 1 July 2025 (23:59 CET)**. Your application must be uploaded to the EULAR School system. Please make sure you upload your applications on-time. After the deadline it will not be accepted.
* **Jury review and decisions:** **10 July 2025 – 10 September 2025** (review of application(s), discussion of outstanding questions and review with applicants).
* **Announcement of successful applications, signing of grants agreements**: By 30 September 2025
* **Project start and duration**: 1 November 2025 – 1 November 2027

**JUDGING CRITERIA (the most important criteria jury members use when they evaluate the applications):**

1. **Need of the applying/learning organisation and benefits for people with RMDs**

* How will the project help the organisation to support people with RMDs
* How will the project involve people with RMDs actively

1. **Feasibility of the project**

* Clearly defined and achievable aim(s)
* A clear description of steps that you will need take to achieve your aim(s)
* A good planning of the project (good logistics of the visits and the overall training)
* The capacity of implementing the learning objectives
* A detailed, realistic and adequate budget

1. **Good evaluation**

* Clearly define what you want to achieve with the project. Focus on the "who, what, where, and why."
* Measure your achievements using
  + quantitative indicators

*for example: 80% raise in new members*

* + or qualitative indicators

*for example: increased patient satisfaction, or 4 reasons for patients’ difficulties to self-manage*

1. **Partnership & cooperation** **& expertise**

* A clear description of the expertise of the teaching organisation (why you chose them)
* Good expertise and skills of people involved in the project (both from the applying/learning and teaching organisation)

**Applying organisation = Learning organisation**

|  |  |
| --- | --- |
| Name |  |
| Country |  |
| Secretariat address |  |
| Telephone |  |
| Main contact person |  |
| E-mail |  |

**Teaching organisation**

|  |  |
| --- | --- |
| Name |  |
| Country |  |
| Secretariat address |  |
| Telephone |  |
| Main contact person |  |
| E-mail |  |

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| --- |
| 1. **Title of your project** |
|  |
| 1. **Please share what your project is about in more detail:**  * What your organisation would like to learn; * The benefits for your organisation; * The benefits for your members/people with RMDs. |
|  |
| 1. **Please let us know who is your Teaching Organisation:**  * Please describe their expertise in the relevant field in detail; * Describe how they can help you concretely to achieve your objectives. |
|  |
| 1. **Please describe step by step how you plan to organise the learning process:**  * Please consider hybrid-meetings or fully virtual approaches wherever feasible. * On-site visits: share an overview with the list of participants, duration of the visits, concrete aim and the on-site agenda. |
|  |
| 1. **Please share how you will use the shared knowledge and apply what you have learned in your organisation short term and long term:** |
|  |
| 1. **Your project can be implemented between 1.11.25 – 1.11.27. Please share your milestones and planned timeline:** |
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| 1. **Are you aware of any risks to impact negatively on your milestones and objectives?** |
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| 1. **Please describe how you define success of your project and how it will be measured:** |
|  |

|  |  |
| --- | --- |
| **Applying / Learning Organisation Project Team**  *(Who is involved? Are people with RMDs involved? Please include very short CVs of the key people.)* | |
| Name / Role and expertise / Email |  |
| Name / Role and expertise / Email |  |
| Name / Role and expertise / Email |  |
| If no person with RMDs is involved, please state why. | |
|  | |

|  |  |
| --- | --- |
| **Teaching Organisation to fill in:**  *(Who is involved? Please include very short CVs of the key people.)* | |
| Name / Role and expertise / Email |  |
| Name / Role and expertise / Email |  |
| Name / Role and expertise / Email |  |
| **Please describe briefly your expertise to teach the applying/learning organisation to achieve their aim (200 words max):** | |
|  | |

**Budget (see supplementary excel file) – Please fill the amounts in EURO**

We acknowledge that the teaching organisation is giving valuable time to the applying/learning organisation. For this reason, it is appropriate to include in the budget an allowance payable to the teaching organisation for the time it is donating to the project. This allowance will be 500 €.

I confirm that the information I have given is accurate to the best of my knowledge and accept the terms under which the grant is awarded.

**Applying/learning organisation**

Place, date:

Signed by Chair/President:

Signed by Project leader:

**Teaching organisation**

Place, date:

Signed by Chair/President:

Signed by Project leader: