



KA2 - Cooperation for innovation and the exchange of good practices

Before you begin completing this eForm:

- Test your connection to the Agency's online submission service. Click on the 'Test your connection' button in the footer of the eForm. This is not to submit your form but merely to test that your software settings and internet connection allow an application to be submitted. If having clicked on this button, you do not receive a confirmation that your connection was successful, please consult the 'Known Issues' section of the eForm homepage. Here you can find, amongst other things, advice on internet settings and Adobe (Reader or Acrobat) security settings, either of which can prevent a successful connection to the Agency's online submission service. Please note that, if after performing a successful test, you move your eForm to a different computer or upgrade your version of Adobe Reader, you will need to perform the test again. This is because the original test result will no longer be valid. For a fuller description of how the 'Test your connection' function works please consult the eForm User Guide.

- Check that you have the latest available version of the eForm. In the event of a significant eForm problem arising, the Agency may decide to make available an updated i.e. corrected version of the eForm. The latest version number of each eForm is displayed on the eForm homepage whilst specific details of any problem and its impact would be published on the funding opportunity webpage of the programme concerned.

These resources and other useful links can be found in a table located at the end of this eForm.

[Click to access table.](#)

Programme :

Erasmus+

Key action :

Cooperation and Innovation for Good Practices (KA2)

Action :

Knowledge Alliances for higher education

Action type :

Knowledge Alliances for Higher Education

Calls for proposals :

EAC-A02-2019-KA

Deadline for submission :

26/02/2020

17:00 hrs (Brussels time)

Project title * :

Systematic Innovation Methodology

Project acronym * :

SIM

Language used to complete the form * :

English



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

List of participating organisations

| Partner no | PIC | Role | Organisation Name | City | Country |
|------------|-----------|------------------------|---|----------------|---------|
| P1 | 999854564 | Applicant Organisation | UNIVERSITAET LEIPZIG | LEIPZIG | Germany |
| P2 | 998731110 | Partner Organisation | INSTITUT NATIONAL DES SCIENCES APPLIQUEES, STRASBOURG | Strasbourg | France |
| P3 | 961360405 | Partner Organisation | HOCHSCHULE OFFENBURG | OFFENBURG | Germany |
| P4 | 999897244 | Partner Organisation | UNIVERSITATEA TEHNICA CLUJ-NAPOCA | CLUJ NAPOCA | Romania |
| P5 | 999591209 | Partner Organisation | LAPPEENRANNAN-LAHDEN TEKNILLINEN YLIOPISTO LUT | LAPPEENRANTA | Finland |
| P6 | 946808562 | Partner Organisation | SCHAEFFLER TECHNOLOGIES AG & CO. KG | HERZOGENAURACH | Germany |
| P7 | 898474238 | Partner Organisation | Arxia Srl | Cluj-Napoca | Romania |
| P8 | 996553363 | Partner Organisation | Tehnoprod Plast | Bistrita | Romania |
| P9 | 951782043 | Partner Organisation | DI Jürgen Jantschgi | Wolfsberg | Austria |
| P10 | 895838166 | Partner Organisation | LLC "Target Invention" | Minsk | Belarus |

Submission number:
000000000

Page 2 of 44

[Go to next error](#)

[Validate form](#)

[Test your connection](#)

The connection test succeeded.



Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | |
|---|---|
| Partner number : | P1 |
| Role in the application : | Applicant Organisation |
| PIC number : | 999854564 |
| Full name of the organisation in Latin characters : | UNIVERSITAET LEIPZIG |
| Business name : | ULEI |
| Accreditation type : | Erasmus Charter for Higher Education |
| Accreditation number : | 29687-EPP-1-2014-1-DE-EPPKA3-ECHE |
| Status : | Public |
| Non Profit Organisation : | Yes |
| NGO : | No |
| Type of organisation * : | Higher education institution (tertiary level) |
| Registration date : | 1999-06-11 |
| Registration location : | Saxon Parliament |
| Registration country code : | DE |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

RITTERSTRASSE 26

Postcode :

04109

Town :

LEIPZIG

Cedex :

PO Box :

Country :

Germany

Region * :

Germany Extra-Regio

Internet address :

http://www.uni-leipzig.de

Telephone 1 :

00493419730100

Telephone 2 :

Fax :

Submission number:
000000000

Page 4 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



A.2 Person responsible for the management of the application (Contact person)

| | | |
|---------------------------------|-------------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Prof. Dr. | Neumuth | Thomas |
| <hr/> | | |
| Department / Faculty : | ICCAS Innovation Center | |
| <hr/> | | |
| Role in the organisation * : | E-mail address * : | |
| Deputy Executive Director ICCAS | thomas.neumuth@uni-leipzig.de | |
| <hr/> | | |

☒ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|---------------|----------|
| Street name and number * : | Postcode : | |
| Semmelweisstraße 14 | 04103 | |
| <hr/> | | |
| Town * : | Cedex : | PO Box : |
| Leipzig | | |
| <hr/> | | |
| Country * : | Region * : | |
| Germany | SACHSEN | |
| <hr/> | | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +49-341-9712000 | | |
| <hr/> | | |

☒ Check this box if the legal representative is different from the person responsible for the management



A.3 Person authorised to represent the organisation in legally binding agreements (legal representative)

| | | |
|------------------------------|-----------------|--------------------------|
| Title * : | Family name * : | First name * : |
| Prof. Dr. | Dräger | Birgit |
| Department / Faculty : | | |
| Role in the organisation * : | | E-mail address * : |
| chancellor | | kanzlerin@uni-leipzig.de |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|---------------------|------------|
| Street name and number * : | | Postcode : |
| RITTERSTRASSE 26 | | 04109 |
| Town * : | Cedex : | PO Box : |
| LEIPZIG | | |
| Country * : | Region * : | |
| Germany | Germany Extra-Regio | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +49-341-9730100 | | |



Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|---|---|
| Partner number : | P2 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 998731110 | |
| Full name of the organisation in Latin characters : | INSTITUT NATIONAL DES SCIENCES APPLIQUEES, STRASBOURG | |
| Business name : | | |
| Accreditation type : | Erasmus Charter for Higher Education | |
| Accreditation number : | 28099-EPP-1-2014-1-FR-EPPKA3-ECHE | |
| Status : | Public | |
| Non Profit Organisation : | Yes | |
| NGO : | No | |
| Type of organisation * : | Higher education institution (tertiary level) | |
| Registration date : | 2003-01-01 | |
| Registration location : | n/a | |
| Registration country code : | FR | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Boulevard de la Victoire 24

Postcode :

67084

Town :

Strasbourg

Cedex :

PO Box :

Country :

France

Region * :

Extra-Regio NUTS 2

Internet address :

www.insa-strasbourg.fr

Telephone 1 :

0388144700

Telephone 2 :

Fax :

Submission number:
000000000

Page 8 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



A.2 Legal representative / contact person

| | | |
|------------------------------|-------------------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Prof. | Cavallucci | Denis |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Head of CSIP Research Team | denis.cavallucci@insa-strasbourg.fr | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|-----------------------------|--------------------|------------|
| Street name and number * : | | Postcode : |
| Boulevard de la Victoire 24 | | 67084 |
| Town * : | Cedex : | PO Box : |
| Strasbourg | | |
| Country * : | Region * : | |
| France | Extra-Regio NUTS 2 | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +33-388-144755 | | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|---|---|
| Partner number : | P3 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 961360405 | |
| Full name of the organisation in Latin characters : | HOCHSCHULE OFFENBURG | |
| Business name : | | |
| Accreditation type : | Erasmus Charter for Higher Education | |
| Accreditation number : | 29803-EPP-1-2014-1-DE-EPPKA3-ECHE | |
| Status : | Public | |
| Non Profit Organisation : | Yes | |
| NGO : | No | |
| Type of organisation * : | Higher education institution (tertiary level) | |
| Registration date : | | |
| Registration location : | | |
| Registration country code : | DE | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

BADSTRASSE 24

Postcode :

77652

Town :

OFFENBURG

Cedex :

PO Box :

Country :

Germany

Region * :

BADEN-WÜRTTEMBERG

Internet address :

www.hs-offenburg.de

Telephone 1 :

+49 781 205 130

Telephone 2 :

Fax :

+49 781 205 333



A.2 Legal representative / contact person

| | | |
|------------------------------|------------------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Prof. Dr.-Ing. | Livotov | Pavel |
| <hr/> | | |
| Department / Faculty : | Mechanical and Process Engineering | |
| <hr/> | | |
| Role in the organisation * : | E-mail address * : | |
| staff member | pavel.livotov@hs-offenburg.de | |
| <hr/> | | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|-------------------|----------|
| Street name and number * : | Postcode : | |
| BADSTRASSE 24 | 77652 | |
| <hr/> | | |
| Town * : | Cedex : | PO Box : |
| OFFENBURG | | |
| <hr/> | | |
| Country * : | Region * : | |
| Germany | BADEN-WÜRTTEMBERG | |
| <hr/> | | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +49-781-2054685 | | |
| <hr/> | | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|---|---|
| Partner number : | P4 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 999897244 | |
| Full name of the organisation in Latin characters : | UNIVERSITATEA TEHNICA CLUJ-NAPOCA | |
| Business name : | UTC | |
| Accreditation type : | Erasmus Charter for Higher Education | |
| Accreditation number : | 49969-EPP-1-2014-1-RO-EPPKA3-ECHE | |
| Status : | Public | |
| Non Profit Organisation : | Yes | |
| NGO : | No | |
| Type of organisation * : | Higher education institution (tertiary level) | |
| Registration date : | 1993-07-13 | |
| Registration location : | CLUJ NAPOCA | |
| Registration country code : | RO | |

Submission number:
000000000

Page 13 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

STR MEMORANDUMULUI 28

Postcode :

400114

Town :

CLUJ NAPOCA

Cedex :

PO Box :

Country :

Romania

Region * :

Extra-Regio NUTS 2

Internet address :

http://www.utcluj.ro

Telephone 1 :

+40264202202

Telephone 2 :

+40264202209

Fax :

+40264592055



A.2 Legal representative / contact person

| | | |
|---------------------------------|---------------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Prof. Dr.-Ing. | Brad | Stelian |
| <hr/> | | |
| Department / Faculty : | Design Engineering and Robotics | |
| <hr/> | | |
| Role in the organisation * : | E-mail address * : | |
| Director Program Study Robotics | stelian.brad@staff.utcluj.ro | |
| <hr/> | | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|--------------------|------------|
| Street name and number * : | | Postcode : |
| STR MEMORANDUMULUI 28 | | 400114 |
| <hr/> | | <hr/> |
| Town * : | Cedex : | PO Box : |
| CLUJ NAPOCA | | |
| <hr/> | | <hr/> |
| Country * : | Region * : | |
| Romania | Extra-Regio NUTS 2 | |
| <hr/> | | <hr/> |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +40-730017126 | | |
| <hr/> | | <hr/> |



Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|--|---|
| Partner number : | P5 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 999591209 | |
| Full name of the organisation in Latin characters : | LAPPEENRANNAN-LAHDEN TEKNILLINEN YLIOPISTO LUT | |
| Business name : | LUT University | |
| Accreditation type : | Erasmus Charter for Higher Education | |
| Accreditation number : | 29580-EPP-1-2014-1-FI-EPPKA3-ECHE | |
| Status : | Public | |
| Non Profit Organisation : | Yes | |
| NGO : | No | |
| Type of organisation * : | Higher education institution (tertiary level) | |
| Registration date : | 1979-01-02 | |
| Registration location : | N/A | |
| Registration country code : | FI | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

YLIOPISTONKATU 34

Postcode :

53850

Town :

LAPPEENRANTA

Cedex :

PO Box :

20

Country :

Finland

Region * :

Extra-Regio NUTS 3

Internet address :

www.lut.fi

Telephone 1 :

+358294462111

Telephone 2 :

Fax :



A.2 Legal representative / contact person

| | | |
|------------------------------|-------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Prof. Dr. | Chechurin | Leonid |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Professor | leonid.chechurin@lut.fi | |

☒ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|--------------------|------------|
| Street name and number * : | | Postcode : |
| Uranukseukate 29 | | 53850 |
| Town * : | Cedex : | PO Box : |
| Lappeenranta | | |
| Country * : | Region * : | |
| Finland | Extra-Regio NUTS 3 | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +35-8504419193 | | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|-------------------------------------|---|
| Partner number : | P6 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 946808562 | |
| Full name of the organisation in Latin characters : | SCHAEFFLER TECHNOLOGIES AG & CO. KG | |
| Business name : | SCHAEFFLER | |
| Accreditation type : | | |
| Accreditation number : | | |
| Status : | Private | |
| Non Profit Organisation : | No | |
| NGO : | No | |
| Type of organisation * : | Large enterprise | |
| Registration date : | 2013-11-04 | |
| Registration location : | FURTH | |
| Registration country code : | DE | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Postcode :

INDUSTRIESTR 1-3

91074

Town :

Cedex :

PO Box :

HERZOGENAURACH

Country :

Region * :

Germany

BAYERN

Internet address :

www.schaeffler.com

Telephone 1 :

Telephone 2 :

Fax :

+499132820



A.2 Legal representative / contact person

| | | |
|------------------------------|--------------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Mr. | Fuhrmann | Thomas |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Innovation Manager | Thomas.Fuhrmann@schaeffler.com | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|------------------|------------------|
| Street name and number * : | Postcode : | |
| INDUSTRIESTR 1-3 | 91074 | |
| Town * : | Cedex : | PO Box : |
| HERZOGENAURACH | | |
| Country * : | Region * : | |
| Germany | BAYERN | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +49-9132-82-86325 | +49-151-46258183 | +49-9132-82-5934 |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|-----------------------------------|---|
| Partner number : | P7 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 898474238 | |
| Full name of the organisation in Latin characters : | Arxia Srl | |
| Business name : | Mr. | |
| Accreditation type : | | |
| Accreditation number : | | |
| Status : | Private | |
| Non Profit Organisation : | No | |
| NGO : | No | |
| Type of organisation * : | Small and medium sized enterprise | |
| Registration date : | 1996-05-27 | |
| Registration location : | | |
| Registration country code : | RO | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Str Primaverii 8/262

Postcode :

400540

Town :

Cluj-Napoca

Cedex :

PO Box :

Country :

Romania

Region * :

Nord-Vest

Internet address :

www.arxia.com

Telephone 1 :

+40744399015

Telephone 2 :

Fax :

Submission number:
00000000

Page 23 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



A.2 Legal representative / contact person

| | | |
|------------------------------|-----------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Mr. | Homorodean | Daniel |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Managing Director | daniel.homorodean@arxia.com | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|---------------|------------|
| Street name and number * : | | Postcode : |
| Str Primaverii 8/262 | | 400540 |
| Town * : | Cedex : | PO Box : |
| Cluj-Napoca | | |
| Country * : | Region * : | |
| Romania | Nord-Vest | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +40-744-399015 | | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|-----------------------------------|---|
| Partner number : | P8 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 996553363 | |
| Full name of the organisation in Latin characters : | Tehnoprod Plast | |
| Business name : | TEHN | |
| Accreditation type : | | |
| Accreditation number : | | |
| Status : | Private | |
| Non Profit Organisation : | No | |
| NGO : | No | |
| Type of organisation * : | Small and medium sized enterprise | |
| Registration date : | 1995-09-25 | |
| Registration location : | Bistrita | |
| Registration country code : | RO | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Libertatii 1A

Postcode :

420155

Town :

Bistrita

Cedex :

PO Box :

Country :

Romania

Region * :

Extra-Regio NUTS 2

Internet address :

www.tehnoprodplast.ro

Telephone 1 :

0040263237398

Telephone 2 :

Fax :

0040263237398

Submission number:
000000000

Page 26 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



A.2 Legal representative / contact person

| | | |
|------------------------------|-----------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Dipl.-Ing. | Moraru | Lucian |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Product Manager | lucian-moraru@tehnoplast.ro | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|--------------------|------------|
| Street name and number * : | | Postcode : |
| Libertatii 1A | | 420155 |
| Town * : | Cedex : | PO Box : |
| Bistrita | | |
| Country * : | Region * : | |
| Romania | Extra-Regio NUTS 2 | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +40-263-237398 | | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|-----------------------------------|---|
| Partner number : | P9 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 951782043 | |
| Full name of the organisation in Latin characters : | DI Jürgen Jantschgi | |
| Business name : | Jantschgi C&R | |
| Accreditation type : | | |
| Accreditation number : | | |
| Status : | Private | |
| Non Profit Organisation : | No | |
| NGO : | No | |
| Type of organisation * : | Small and medium sized enterprise | |
| Registration date : | | |
| Registration location : | | |
| Registration country code : | AT | |

Submission number:
000000000

Page 28 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Eppensteinerstrasse 36

Postcode :

9400

Town :

Wolfsberg

Cedex :

PO Box :

Country :

Austria

Region * :

Extra-Regio NUTS 2

Internet address :

www.jantschgi.at

Telephone 1 :

+436769406476

Telephone 2 :

+43435335636

Fax :



A.2 Legal representative / contact person

| | | |
|------------------------------|----------------------|----------------|
| Title * : | Family name * : | First name * : |
| DI | Jantschgi | Jürgen |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Owner | juergen@jantschgi.at | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|--------------------|----------|
| Street name and number * : | Postcode : | |
| Eppensteinerstrasse 36 | 9400 | |
| Town * : | Cedex : | PO Box : |
| Wolfsberg | | |
| Country * : | Region * : | |
| Austria | Extra-Regio NUTS 2 | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +45 676 9406476 | | |



Part A. Identification of the applicant and other organisation(s) participating in the project

This part must be completed separately for each organisation participating in the project, after they have registered in the central database (URF-PDM)

A.1 Organisation

| | | |
|---|-----------------------------------|---|
| Partner number : | P10 | X |
| Role in the application * : | Partner Organisation | |
| PIC number : | 895838166 | |
| Full name of the organisation in Latin characters : | LLC "Target Invention" | |
| Business name : | Target Invention | |
| Accreditation type : | | |
| Accreditation number : | | |
| Status : | Private | |
| Non Profit Organisation : | No | |
| NGO : | No | |
| Type of organisation * : | Small and medium sized enterprise | |
| Registration date : | 2019-10-07 | |
| Registration location : | | |
| Registration country code : | BY | |



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Registered address

Street name and number :

Urozhajnaya Str., 9-1

Postcode :

220063

Town :

Minsk

Cedex :

PO Box :

39

Country :

Belarus

Region * :

Belarus

Internet address :

target-invention.com

Telephone 1 :

+375291102854

Telephone 2 :

Fax :



A.2 Legal representative / contact person

| | | |
|------------------------------|-------------------------|----------------|
| Title * : | Family name * : | First name * : |
| Mr. | Ivanov | Anton |
| Department / Faculty : | | |
| | | |
| Role in the organisation * : | E-mail address * : | |
| Director | a.ivanov@triztrainer.ru | |

☐ Check this box if the address is different from the address provided in section A.1

Address

| | | |
|----------------------------|---------------|------------|
| Street name and number * : | | Postcode : |
| Urozhajnaya Str., 9-1 | | 220063 |
| Town * : | Cedex : | PO Box : |
| Minsk | | 39 |
| Country * : | Region * : | |
| Belarus | Belarus | |
| Telephone 1 * : | Telephone 2 : | Fax : |
| +375291102854 | | |



Part B. Description of the project

B.1 Summary of the project (max 2000 characters). Please note that this information may be used for dissemination purposes

For successful applications, this section will be published, as presented below, in compendia etc. You should therefore ensure that it gives a concrete overview of the work your consortium plans to undertake including:

- The reason of your project
- Concise description of the outputs, results and / or products (including where relevant key pedagogical strategies, media used, language versions, etc.)
- The impact envisaged

Please indicate the language of the summary * :

English

Please provide your summary * :

Knowledge and skills in the field of Systematic Innovation Methodologies (SIM) has a growing importance as a cross-sectional qualification for systematic analysis of complex contradictory situations in everyday professional life and to reveal innovative solutions.

The project team consists of four HEI experienced in SIM training, Leipzig University as a further HEI with the aim of establishing appropriate training structures, Schaeffler Technologies as a large industrial partner with long-term experience with SIM-skilled employees for the company's own development, two further SMEs with own SIM experience and Jantschgi C&R as a SIM consulting company. The team is completed by the partner Target Invention Minsk, whose team has been active in this field since the 1970s and brings important experience from own international activities, especially in the Asian region.

To increase the strength of SIM knowledge and skills structures in Europe this Knowledge Alliance aims to

1. form a strong networking structure of already successful SIM teaching and training in HEI at different EU locations and in different forms of HEI (focus A),
2. set up and develop a consulting and participation structure for this training infrastructure by companies from within the EU that are aware of the potential of SIM for their strategic development (focus B),
3. organise interoperation between these two networks, to get practical input for the development of corresponding curricula on the one hand and on the other hand, to offer use cases and challenging operational tasks for training and further development of the students,
4. further expand these networks with additional partners, and
5. support other HEI's in setting up appropriate training and further education offers.

The project contributes to strengthen the innovative power of EU companies expanding structures of training and further education in cooperation with entrepreneurial structures and inter-industrial organisations.

B.2 Educational Level and topics addressed

The content of this application is linked to the following area



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

The field of education that will benefit from the activities / outcomes :

Higher education

Topics * :

Please identify in the box below, which of the topics this application addresses (minimum 1, maximum 3 choices)

- ☐ Agriculture, forestry and fisheries
- ☐ EU Citizenship, EU awareness and Democracy
- ☐ ICT - new technologies - digital competences
- ☐ Creativity and culture
- ☐ Disabilities - special needs
- ☐ Access for disadvantaged
- ☐ Early School Leaving / combating failure in education
- ☐ Economic and financial affairs (incl. funding issues)
- ☐ Social dialogue
- ☐ Labour market issues incl. career guidance / youth unemployment
- ☐ Energy and resources
- ☒ Enterprise, industry and SMEs (incl. entrepreneurship)
- ☐ Environment and climate change
- ☐ Ethics, religion and philosophy (incl. Inter-religious dialogue)
- ☐ Gender equality / equal opportunities
- ☐ Health and wellbeing
- ☐ Home and justice affairs (human rights and rule of law)
- ☐ Inclusion – equity
- ☐ Intercultural/intergenerational education and (lifelong) learning
- ☐ International cooperation, international relations, development cooperation
- ☒ Key Competences (incl. mathematics and literacy) - basic skills



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

- ☐ *Natural sciences*
- ☐ *New innovative curricula/educational methods/development of training courses*
- ☐ *Overcoming skills mismatches (basic/transversal)*
- ☐ *Pedagogy and didactics*
- ☐ *Quality and Relevance of Higher Education in Partner Countries*
- ☐ *Quality Assurance*
- ☐ *Quality Improvement Institutions and/or methods (incl. school development)*
- ☐ *Reaching the policy level/dialogue with decision makers*
- ☐ *Recognition (non-formal and informal learning/credits)*
- ☐ *Regional dimension and cooperation*
- ☒ *Research and innovation*
- ☐ *Romas and/or other minorities*
- ☐ *Rural development and urbanisation*
- ☐ *Teaching and learning of foreign languages*
- ☐ *Recognition, transparency, certification*
- ☐ *Transport and mobility*
- ☐ *Youth (Participation, Youth Work, Youth Policy)*
- ☐ *Open and distance learning*
- ☐ *Post-conflict/post-disaster rehabilitation*
- ☐ *Entrepreneurial learning - entrepreneurship education*
- ☐ *Fighting discrimination and intolerance, usage of drugs/doping, match fixing, violence in sports*
- ☐ *Healthy lifestyle, active ageing*
- ☐ *Sustainable financing in sports, dual careers involving sports, good governance*
- ☐ *Grassroots sports*

Submission number:
000000000

Page 36 of 44

Go to next error

Validate form

**Test your
connection**

The connection test succeeded.



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

☐ Enhance social inclusion, equal opportunities and participation in sports

Briefly describe how your project addresses the topic(s). (max 500 characters) * :

The project is about networking of training capacities in the field of Systematic Innovation Methodologies on a European level in the interplay between HEI as training locations and industry demand of personnel with corresponding skills. Knowledge and skills in this field have a growing importance as cross-sectional qualification for systematic analysis of complex contradictory situations and count more and more as basic skills in engineering and business professions.

B.3 Dates

B.3.1 Dates and duration of the project

Start date * : 01/11/2020

End date : 31/10/2023

Duration (month) * : 36 months

B.4 Grant request

| | EU Grant | | |
|---|--------------------------|------------------------|---------------------|
| | Programme Countries (PR) | Partner Countries (PA) | Total |
| Project implementation support | | | |
| Project implementation support | 875 710,00 € | 60 580,00 € | 936 290,00 € |
| Learning Mobility activities (Optional) | | | |
| Travel costs | 25 850,00 € | 4 400,00 € | 30 250,00 € |
| Subsistence costs | 28 200,00 € | 4 800,00 € | 33 000,00 € |
| Total | 929 760,00 € | 69 780,00 € | 999 540,00 € |

Submission number:
000000000

Page 37 of 44

Go to next error

Validate form

Test your
connection

The connection test succeeded.



Distribution of grant by organisation

| Partner n° | PIC code | Partner Name | Grant requested |
|-----------------------|-----------|--|-----------------|
| P1 | 999854564 | UNIVERSITAET LEIPZIG | 208 662,00 € |
| P2 | 998731110 | INSTITUT NATIONAL DES SCIENCES APPLIQUEES, STRASBOURG | 175 704,00 € |
| P3 | 961360405 | HOCHSCHULE OFFENBURG | 135 442,00 € |
| P4 | 999897244 | UNIVERSITATEA TEHNICA CLUJ-NAPOCA | 58 728,00 € |
| P5 | 999591209 | LAPPEENRANNAN-LAHDEN TEKNILLINEN YLIOPISTO LUT | 145 759,00 € |
| P6 | 946808562 | SCHAEFFLER TECHNOLOGIES AG & CO. KG | 24 473,00 € |
| P7 | 898474238 | Arxia Srl | 27 094,00 € |
| P8 | 996553363 | Tehnoprod Plast | 27 094,00 € |
| P9 | 951782043 | DI Jürgen Jantschgi | 126 804,00 € |
| P10 | 895838166 | LLC "Target Invention" | 69 780,00 € |
| Total grant requested | | | 999 540,00 € |

**Part C. Other****C.1 Learning Mobility (optional)**

Learning mobility may be organised in so far as they support/complement the other activities of the Alliance and bring added value in the realisation of the project's objectives. Learning mobility means moving physically to a country other than the country of residence, in order to undertake study, training or non-formal or informal learning (e.g. traineeships, apprenticeships, youth exchanges, volunteering, teaching or participation in a professional development activity). Learning mobility activities may require preparatory activities, such as training in the host language, as well as sending, receiving and follow-up activities. Learning mobility activities can not constitute the main activities of a Knowledge Alliance.

Does your project include learning mobility activities? * :

☒ Yes

☐ No

| Type of mobility (Students/Staff/Researchers) | Home Country | Hosting country | N° of participants | Add activity |
|---|--------------|-----------------|--------------------|-----------------|
| Staff | Germany | France | 4 | Remove activity |
| Staff | Romania | France | 5 | Remove activity |
| Staff | Finland | France | 3 | Remove activity |
| Staff | Austria | France | 3 | Remove activity |
| Staff | Belarus | France | 3 | Remove activity |
| Staff | France | Germany | 3 | Remove activity |
| Staff | Romania | Germany | 10 | Remove activity |
| Staff | Finland | Germany | 6 | Remove activity |
| Staff | Austria | Germany | 6 | Remove activity |
| Staff | Belarus | Germany | 6 | Remove activity |
| Staff | Germany | Romania | 8 | Remove activity |



| | | | | |
|-------|---------|---------|---|-----------------|
| Staff | France | Romania | 3 | Remove activity |
| Staff | Finland | Romania | 2 | Remove activity |
| Staff | Austria | Romania | 3 | Remove activity |
| Staff | Belarus | Romania | 3 | Remove activity |
| Staff | Germany | Austria | 8 | Remove activity |
| Staff | France | Austria | 3 | Remove activity |
| Staff | Romania | Austria | 5 | Remove activity |
| Staff | Belarus | Austria | 3 | Remove activity |
| Staff | Finland | Austria | 2 | Remove activity |

C.2 Key Results (outputs/outcomes) * :

Please select the Key Results (outputs/outcomes) of your project. (minimum 1, maximum 3 choices)

- ☒ New curricula, study programmes, courses or training modules
- ☒ New learning and teaching methods or approaches
- ☐ Accreditation, certification or degree recognition processes
- ☐ Open educational resources
- ☐ Quality assurance outputs
- ☒ E-learning, including MOOC and other open online courses
- ☐ Virtual platform/community
- ☐ Mobility/placements/internships of students, including virtual mobility
- ☐ Exchange of academics and/or company staff
- ☐ Learning/development/recognition methods for behaviour, competences and skills
- ☐ Support services, such as career guidance, coaching and counselling



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

- ☐ *Studies/good practices/guidelines on university-enterprise cooperation*
- ☐ *Other*

C.3 List of affiliated entities

Not Applicable



Erasmus+

Form version : 2.6 EN Adobe Reader version : 20.00620034

Attachments (see compulsory templates on EACEA website)

The maximum size of all attachments together cannot exceed 10 MB.

Detailed Project Description (Word, PDF, RTF, ODT)*

Detailed Budget (Excel, ODS) *

Declaration on Honour (PDF, TIF, JPG) *

Submission number:
000000000

Page 42 of 44

Go to next error

Validate form

**Test your
connection**

The connection test succeeded.



Application's reference(s)

Has this or a similar application already been submitted under a previous call for proposals?

☐ Yes

☒ No

Submission number :

000000000

Errors list

The description of the project has not been attached

Declaration of Honour has not been attached.

The budget tables have not been attached.



Useful links

| Item | Link |
|------------------------------|---|
| Agency's homepage : | https://eacea.ec.europa.eu/homepage |
| Agency's eForm homepage : | https://eacea.ec.europa.eu/documents/eforms_en |
| eForm technical user guide : | https://eacea.ec.europa.eu/documents/eforms_en |
| Known technical issues : | https://eacea.ec.europa.eu/documents/eforms_en |

[Go back to first page](#)