USE CASE INITIATIVES 2025

HI ACTS

DATE OF APPLICATION

Application Form

e filled out in english or german language		
1. CONTACT DETAILS AND GE	ENERAL INFORMATION	
Name of Submitter:		
Title:	Phone :	
Name of Institiution :	Email :	
Group /Department :		
Project Partner, if applicable :		
Name:		
Title:	Phone :	
Name of Institution/ Company :	Email :	
Group /Department :		
o point proopintion of th	WASIONED DOGEST	
 BRIEF DESCRIPTION OF EN 	IVISIONED PROJECT	
Overall goal, accelerator-related technology / using the funding. (max. 2000 characters)	method, current state of development and action	ons you intend to implement

3. DESCRIPTION OF POTENTIAL, CURRENT OR FUTURE APPLICATIONS AND INDUSTRIAL USE CASE

	cion case outside the scientific community do you want to address?
	or potential markets will your technology or analytical solution (such as a service) address? dustrial sectors might be interested in your technological solution/product/product
ervice/analytical servi	
you already collabora	te with a company, please provide details. (max. 2000 characters)

	low does your project contribute to the dedicated Use Case Initiatives areas of industrial focus or to the overall Hi-Acts bjectives? (max. 500 characters)
4	. FURTHER DETAILS OF THE PROJECT FOR ASSESSING TECHNOLOGY READINESS LEVEL AND TIME-TO-MARKET PERSPECTIVE
	Which specific goals are pursued by the Hi-Acts funded project (please list in short key sentences)? (max. 500 characters) Which concrete activities or investments do you intend to seed-fund via the Hi-Acts Use Case Initiative? (max. 500
	characters)

5. FINANCIAL PLAN

	Details (What? Who?)	Timeline	Costs	Optional: Co- financing or contributions by (industry) partners
Investments	Details investments	Timeline investments	•€	Contribution and€
Material	Details materials	Timeline materials	•€	Contribution and€
Personell	Details personell	Timeline personell	•€	Contribution and€
Total			Sum of Costs	Sum of external/industrial contributions

6. COMMENTS AND/OR CONTRIBUTION STATEMENT OF THE PROJECT PARTNER

(optional, max 500 characters)					

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Important note:

Your application will be forwarded to selected industry representatives for their recommendation and to the transfer experts of the Helmholtz partners in the Hi-Acts consortium for review. All information provided in the application will be kept strictly confidential. The industry representatives and transfer reviewers will neither forward the application to third parties nor make it accessible to third parties. This applies even after the selection process has been completed.

Please send this application back to: info@hi-acts.de

THANK YOU FOR YOUR APPLICATION