



Guidance on submitting an Expression of Interest on Plaza

Plaza has now been opened for the submission of Expressions of Interest (EOI) for the BP 2022 Education -i-Days.

This document serves as an overview of the requirements for **Call for Proposals - EOIs for Education – i-Days** proposals within the 2022 EIT Health call. You will find information on the individual tabs, briefly explaining (*in green italics*) what is required in each tab and definitions of terms where required.

Table of Contents

Guidance on submitting an Expression of Interest on Plaza	1
How to Register on Plaza	2
Guidance on submitting an EOI on Plaza	3
Tab 0 – Start Here	3
Tab 1A – General Information	4
Tab 2 – Activity Details	5
Ready to Submit?	6





How to Register on Plaza

The first step towards accessing a proposal on Plaza, is to register yourself – if you have not already done so. Once your registration has been processed and you have received the login credentials, you are ready to start! To register on Plaza, please go to <u>https://plaza.eithealth.eu/</u> and click on "Is this your first time?".

- 1. Register on Plaza.
 - If you are already registered please go to Step 2 below.
 - If you need to register please go to https://plaza.eithealth.eu/register and follow these steps:

A	Completed Address Personal and Organization Details Verification O Completed ET HEALTH PLAZA REGISTRATION FILL IN THE EMAIL ADDRESS OF THE PERSON YOU WANT TO REGISTER Email Address The email address should marganization official domains register persons with a priva	How to Register: A. Input your email B. Input your Personal/Org details C. Verify D. Submit You receive a 5-digit passcode within 3 working days
B.	address. Address Mail Address Personal and Organization Details S Verification	Next >> >
	EIT HEALTH PLAZA REGISTRATION FILL IN THE PERSONAL AND CONTACT DATA First Name Last Name Initials (nlease senarate with *	
C .	① Mail Address ② Personal and Organization Details ③ Verification	• Completed
	EIT HEALTH PLAZA REGISTRATION VERIFY THE DATA YOU HAVE ENTERED Personal and Organization Details	
D .	① Mail Address ② Personal and Organization Details ③ Verification	Completed
	EIT HEALTH PLAZA REGISTRATION YOUR REGISTRATION HAS BEEN PROCESSED Thank you for your registration! Once your eligibility has been confirmed, you will receive a passcode to enter the EIT Health community plaza. This can Registration does not mean you will receive access to EIT Health Plaza. Your registration needs to be approved prior to access.	take up to 3 working days.



2. Once you are registered, please login.

eit Health Plaza	EIT Health Plaza		- ₩ł • •	nen you log in please: Change your password Agree to the confidentiality clause
	Username 0 Password / Code 0	FORGOT PASSWORD Is this your first time? Then register here.		

Guidance on submitting an EOI on Plaza

The first part of this document serves as an overview of the requirements for Call for Expression of Interest – for Education i-Days EOIs within the 2022 EIT Health call. You will find the information on the individual tabs, briefly explaining what is required in each tab and definitions of terms, where required.

Tab 0 - Start HerePlease complete all fields and save to progress to next tabs.

Health Plaza	ninggen an an ann an ann an ann an an an an an
220019 - CALL 2022 EIT HEALTH	
	Delete Proposal 🗙 Back to List
Generated Proposal ID	

Generated Proposal ID	Generated automatically, ID valid for duration of proposal
Select Activity Type	Select your Activity Type from the list
Select Segment for Proposed Activity	Select Students & Fellowships Track – i-Days
New or Existing Activity	All i-Days are new activities thus this field is auto-selected and cannot be modified.
□ New Activity	

 $\hfill\square$ Continuation of Existing Activity



Optionally assign additional people editing rights for this proposal. They will have full access to your proposal.

Assign Co-Editors

D. START HERE				
Generated Proposal ID	1	220019		
Select Activity Type for Proposed Activity Only change this when you selected the	/	Select Activity	/ Type (Required)	¥
elect Segment for Proposed Lctivity Inly change this when you selected the rrang segment for this proposal. If you ne a create a proposal of a different segmer (ell, you should create a new proposal.	ed t as	Select Segme	int (Required)	•
lew or Existing Activity	/	 New Activity 	/ O Continuation of Existing Activity	
Assign Co Editors	1	Edit	Editor Name Select a person from this dropdown list to add it to your list of editors of this proposal	•
			Cheek and Ca	

Tab 1A – General Information

Generated Proposal ID *This field is automated	Taken from Tab 0
Activity Title	
Activity Acronym	
Start / End Date	Choose dates from calendar





PARTICIPATING PARTNERS

Lead Partner	Select Lead Partner from the dropdown list. NOTE: Only EIT Health partners of type "Core", "Associate", "Affiliated Entity", and "External Project Partner" can lead an activity. If you would like a non-registered partner to lead an activity, please email your HUB Manager requesting this to them.
Activity Leader of Lead Partner	Select Lead Partner from the dropdown list.
E-Mail of Activity Leader	E-Mail will be automatically added
Specify ALL EIT Health Core / Associate Partners / Registered External Project Partners involved (including the Lead Partner)	Please select EIT Health Core / Associate Partners, LTPs or EPPs from this dropdown list to add to your list of involved Partners.
Non-registered External Project Partners involved	This field is for external project partners that have not yet registered/acceded to the legal framework of EIT health. The EPP must accede to the legal framework if the activity is selected for funding.

How to register an External Project Partner

Once a project that includes an unregistered External Project Partner is approved to the Business Plan (BP), the project's Activity Leader should seek to formally register the External Project Partners (i.e., to begin the process to accede the EPP to the relevant legal framework of EIT Health). To initiate this process, the Activity Leader should send an email request to the Partnership Manager (partnershipmanager@eithealth.eu), including details of the project, the full name of the organisation and the name and contact details for an individual to coordinate the registration process with. This <u>guidance note</u> outlines the process and documentation involved.

Tab 2 – Activity Details

PROJECT EXCELLENCE AND STRATEGIC FIT

Which year(s) are you applying for?

□ 2022 □ 2023 □ 202 ⁴



What is your vision for the i-Days in your city? [1500 characters]

Format

In which format will you deliver your i-Day?

- In-person
- Blended
- □ Online
- 🗆 Other

Ready to Submit?

Before you submit

- Make sure you click "Check & Save" on all tabs. All tabs should be marked with a green "check".
- Please use the "Export PDF" function to review your proposal. Note: evaluators will see this PDF, so ensure that your data and text is how you want it to appear.

To submit

• Go back to the "Call for Proposals" dashboard and click the "Final Submit"

	eit	Hea	lth			
CA	LL 2022	ACTIVI	TY PR	OPOSAL	S	
۰ Fin	al submit is o	nly available a	fter all tab	is are validat	ed.	
Add Nev	w Proposal	÷				
Code	PDF Export (full)	PDF Export (compact)	Edit	Final Submit	Segment	Activity Name
T					T	
220001	2	12	(inal Submit	



Once you submit

- No changes will be allowed once you have submitted your EOI.
- You will receive an automatic confirmation e-mail from office@eithealth.eu. Please do not respond to this e-mail.
- Any draft Expressions of Interest that are **not** submitted by the deadline will be considered **ineligible**.