

#### EUROPEAN COMMISSION

Research Executive Agency (REA) Director



#### GRANT AGREEMENT

## NUMBER — 701897 — FraMoS

This Agreement ('the Agreement') is between the following parties:

#### on the one part,

the **Research Executive Agency (REA)** ('the Agency'), under the power delegated by the European Commission ('the Commission'),

represented for the purposes of signature of this Agreement by Head of Unit, Research Executive Agency (REA), Excellent Science Department, Marie Sklodowska-Curie individual Fellowships European, Jean-Bernard VEYRET,

#### and

#### on the other part,

'the beneficiary':

THE CHANCELLOR, MASTERS AND SCHOLARS OF THE UNIVERSITY OF OXFORD (UOXF), N/A, established in University Offices, Wellington Square, OXFORD OX1 2JD, United Kingdom, GB125506730 represented for the purposes of signing the Agreement by Head of European Team, Gill WELLS

The parties referred to above have agreed to enter into the Agreement under the terms and conditions below.

By signing the Agreement, the beneficiary accepts the grant and agrees to implement it under its responsibility and in accordance with the Agreement, with all the obligations and conditions it sets out.

The Agreement is composed of:

# Terms and Conditions

Annex 1	Description of the action			
Annex 2	Estimated budget for the action			
Annex 3	Not applicable			
Annex 4	Model for the financial statements			
Annex 5	Not applicable			

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## ARTICLE 58 — ENTRY INTO FORCE OF THE AGREEMENT

The Agreement will enter into force on the day of signature by the Agency or the beneficiary, depending on which is later.

## SIGNATURES

For the beneficiary

For the Agency

Gill WELLS with ECAS id npialeli signed in the Participant Portal on 16/03/2016 at 09:49:13 (transaction id Sigld-92558-ZiuPr10LzblacZcminEj48x75xxmBbdvNoA753TzncXwaYkYxWheRV 9X55omJ0frt/8USMbfXbfSn5uNAT96uvE-PHsIUMVSXYCVIAQwgf7zsl-I9wEtNqyf55zyMzIKJh1xx64WGJb8Oa6hRZ7Nrttl860). Timestamp by third party at Wed Mar 16 09:49:20 CET 2016

Signed by Jean-Bernard VEYRET with ECAS id veyreje as an authorised representative on 16-03-2016 11:54:47 (transaction id Sigtd-95512-30Baptizxfio8OGlpvtms9EcmsRBF4hv0BqzfD3VttnG8goaW6jQdTMd BUIdr6b3f2codrm0jdyocG3shYPm2W-PHsIUMVSXYCVtAQwgt7zsl-2K90bCewATIFP5gMLzcyJTJyiLzGuZzoQp6dMXn2n9JK) Wed Mar 16 11:54:52 CET 2016

# European Commission - Research - Participants Proposal Submission Forms Research Executive Agency Proposal ID 701897 Acronym FraMoS Short name UOXF

#### Researcher

The name and e-mail of the Researcher and Supervisor are read-only in the administrative form, only additional details can be edited here. To give access rights and contact details of contact persons, please go back to Step 4 of the submission wizard and save the changes.

Researcher ID	If you have a researcher identifier number (e.g. ResearcherID, ORCID) please enter it here.								
Last Name*	KHAN			La	st Name at Birth				
First Name(s)* II	MRAN	N		Ge	nder*	<ul><li>Male</li></ul>		○ Female	
Title [	Dr.			Co	ountry of residence	e* India			
Nationality*	India			Na	itionality 2				
Date of Birth (DD/N	MM/YY	YY) 15/08/1978		Co	ountry of Birth*	India			
				Pla	ace of Birth	India			
Contact addre	ss					☐ Sa	me a	s organisation address	
Current organisa	ition n	ame	Bhabha Atom	ic Resear	rch Centre				
Current Department/Faculty/Institute/ Laboratory name  Reactor Safety Division									
Street		Room No: 230, Read	or Safety Divis	sion, Hall-	7, Trombay				
Postcode/Cedex		400085			wn [	Mumbai	lumbai		
Phone		+91-22-25593554		Co	ountry	India			
Phone2 / Mobile		+91-9821368303							
E-Mail*	iak_barc@yahoo.com								
Qualifications									
University Degree	е				Date of award (Di	D/MM/YYYY)	08/0	7/1999	
Doctorate (in progress)  Date of award (DD/MM/YYYY)									
Doctorate					Date of award (D	D/MM/YYYY)	03/0	8/2012	
Full time postgra	duate	research experience			Number of mon	iths	180		
Other Academic	Other Academic qualifications Date of award (DD/MM/YYYY)								
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# European Commission - Research - Participants

# **Proposal Submission Forms**

Research Executive Agency

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Acronym FraMoS

Short name UOXF

# Supervisor

The name and e-mail of the Researcher and Supervisor are read-only in the administrative form, only additional details can be edited here. To give access rights and contact details of contact persons, please go back to Step 4 of the submission wizard and save the changes.

Title	Prof.		Sex	<ul><li>Male</li></ul>	○ Female
First name*	Alan	I	Last name*	Cocks	
E-Mail*	alan.cocks@eng.ox.ac.uk				
Position in org.	Professor of Materials Engineering	g			
Department	Engineering Sciences				
	Same as organisation address	i			
Street	Parks Road				
Town	Oxford	F	Post code O	X1 3PJ	
Country	United Kingdom				
Website	http://www.eng.ox.ac.uk/solidmed	:h/people/			
Phone	+44 1865 2 83490 Phon	e 2 +xxx xxxxxxxxxx	(	Fax	+xxx xxxxxxxx

# Other contact persons

First Name	Last Name	E-mail	Phone
Gill	Wells	ecresearch@admin.ox.ac.uk	+441865289800
Amanda	Bradbury	amanda.bradbury@eng.ox.ac.uk	+441865273812
Louise	Bristow	louise.bristow@eng.ox.ac.uk	+441865283310