

**APPLICATION FORM**

**MICROBIOTA &**

**WOMEN HEALTH   
INTERNATIONAL**

**GRANT 2026**

**WOMEN’S MICROBIOTA**

**AND REPRODUCTION:**

**FUNCTIONAL EXPLORATION**

**AT THE HOST-MICROBIOTA**

**INTERFACE.**

***Functional exploration at the***

***host-microbiota interface in reproduction***

***includes infertility, pregnancy complications,***

***pregnancy loss, implantation failure, and***

***assisted reproduction, among others.***

PLEASE COMPLETE THIS FORM AND SEND IT BACK BY EMAIL TO:apply@biocodexmicrobiotafoundation.com

Microbiota & Women Health international grant – **2026**

APPLICATION FORM

Information Notice  
  
BIOCODEX MICROBIOTA FOUNDATION, a company foundation for microbiota founded by BIOCODEX (hereafter referred to as the “Foundation”), whose headquarters are located at 22 rue des Acqueducs in GENTILLY (94250), France, has implemented a processing of personal data to support international research projects on microbiota and human health.

This processing is required for the legitimate interests of the Foundation (promoting research on microbiota and their interaction with different pathologies).

By submitting your application, you authorize the Foundation to process your data confidentially and securely, within the strict framework of the above-mentioned processing. Your data will be kept from the time of receipt until the award winner is selected, then they will be permanently archived. However, should you be the award winner, your data will be kept on an active database for the duration of the research project (3 years maximum), then for another 3 years (given the tax authorities’ prescription periods).

Within the limits of their requirements, the recipients of all or part of your data will include the members of the Foundation’s board and international scientific committee, BIOCODEX staff members responsible for the administrative management of the Foundation and staff of any service providers involved.

Due to the international nature of this competition, certain data are liable to be transferred outside the European Union. According to the applicable regulation concerning personal data protection, particularly Regulation (EU) 2016/679 dated April 27, 2016 (General Data Protection Regulation), you can exercise, upon proof of your identity, a right of access, a right to rectification, to erasure, to restriction and to object regarding data relating to you by contacting BIOCODEX’s Data Protection Officer (DPO), in English or French, by e-mail (dpo@biocodex.com) or by mail (DPO BIOCODEX, 22 rue des Acqueducs, 94250 GENTILLY, France). You can also, if necessary, submit a complaint to a supervisory authority (the CNIL for France – [www.cnil.fr](http://www.cnil.fr)).

**PROJECT LEADER**

FIRST NAME\*:

LAST NAME\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

TELEPHONE\*:

CELL PHONE\*:

E-MAIL\*:

CV: attach file to your email (2 pages including best or last publications)

**ORGANIZATION**

NAME\*:

LEGAL STATUS\*:

SERVICE\*:

STREET ADDRESS 1\*:

STREET ADDRESS 2\*:

CITY\*:

ZIP/POSTAL CODE\*:

COUNTRY\*:

**GRANT MANAGING ORGANIZATION   
(IF DIFFERENT FROM ABOVE)**

***IF NOT APPLICABLE, PLEASE SKIP TO NEXT STEP***

NAME\*:

JURIDIC STATUS\*:

STREET ADDRESS 1\*:

STREET ADDRESS 2\*:

CITY\*:

ZIP/POSTAL CODE\*:

COUNTRY\*:

**PROJECT**

SCIENTIFIC CONFIDENTIAL SUMMARY \* (1 page, Arial 10)

NON-CONFIDENTIAL SUMMARY\* (1/2 page, Arial 10)

**PROJECT DESCRIPTION**

(3 pages, Arial 10)

TITLE\*:

ACRONYM\*:

GENERAL CONTEXT OF THE PROJECT\*:

OBJECTIVES\*:

METHODOLOGY\*:

EXPECTED RESULTS\*:

ANY NECESSARY ADMINISTRATIVE AUTHORIZATION: attach file to your email

**MAIN INVESTIGATOR TEAM:**

**PERSON 1**

FIRST NAME\*:

LAST NAME\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

E-MAIL\*:

**PERSON 2**

FIRST NAME\*:

LAST NAME\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

E-MAIL\*:

**PERSON 3**

FIRST NAME\*:

LAST NAME\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

E-MAIL\*:

**PERSON 4**

FIRST NAME\*:

LAST NAME\*:

POSITION\*:

TITLE\*:

MAIN DISCIPLINE\*:

E-MAIL\*:

**PARTNER TEAMS 1**

NAME OF ORGANIZATION\*:

NAME OF SERVICE\*:

ORGANIZATION LOCATION\*:

NAME OF MAIN CONTACT\*:

E-MAIL\*:

**PARTNER TEAMS 2**

NAME OF ORGANIZATION\*:

NAME OF SERVICE\*:

ORGANIZATION LOCATION\*:

NAME OF MAIN CONTACT\*:

E-MAIL\*:

**BIBLIOGRAPHY**

(1 page, Arial 10)

**BUDGET**

**The use of the total amount of 200 000 € must be justified**

**To be presented in a table with a total sum – Currency has to be Euro**

(1 page, Arial 10)

**SCHEDULE**

(1 page, Arial 10)