



**UNIVERSITÀ
DEGLI STUDI
DI UDINE**
hic sunt futura

DIPARTIMENTO DI MEDICINA

MARKET SURVEY FOR SPONSORSHIP RESEARCH

for the

ADVANCED COURSE

"FELLOWSHIP IN TEMPOROMANDIBULAR JOINT SURGERY"

for the academic year 2024/2025

1. OBJECT OF THE INITIATIVE

The Department of Medicine of the University of Udine, hereinafter referred to as the Department, intends to identify **sponsors** for the activation and financial support for the organization of the **ADVANCED COURSE "FELLOWSHIP IN TEMPOROMANDIBULAR JOINT SURGERY"** which will take place indicatively from November 2024 to May 2025.

Sponsorship is non-exclusive. The University may reject proposals that are manifestly incompatible with the course or institutional purposes of the Institution. The Department reserves the right to forward the present call to entities/companies with which it is already in contact in order to better promote the initiative.

2. FORMS OF VEHICULATION

The sponsorship to be proposed, aimed at supporting the Course, may include one or both of the forms listed below, with a financial contribution to the organization of the Master of no less than 2,500.00 + VAT (22%), as per Sponsor Prospect.

Sponsor Prospect

Option	Form of visibility	Technical sponsor	Silver	Gold	Platinum
		Workshop instruments	€ 2,500	€ 5,000	€ 10,000
TO	<ul style="list-style-type: none"> Thanks to the company in the "Technical sponsor" section (short thank you sentence inserted at the end of posters, brochures and/or web pages, without logo) 	✓			
B	<ul style="list-style-type: none"> Company logo in the website, in promotional materials (both web and on physical media) of the Course in the "Sponsor" section 		✓	✓	✓
C	<ul style="list-style-type: none"> Company illustrative materials to be attached to the documentation provided to participants 		✓	✓	✓
	<ul style="list-style-type: none"> Display physical media promoting the company (e.g., banner, documentary/instrumental material station) at the Course venue 			✓	✓
D	<ul style="list-style-type: none"> Organization of a scientific session/Workshop/Roundtable dedicated and included in the scientific program and 				✓



	shared with the Course Director				
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Table for technical sponsors:

Anyone wishing to participate as a technical sponsor agrees to provide one of the following packages on free loan:

PACKAGE NAME	DESCRIPTION	LOAN DURATION
Piezoelectric Console	N°6 piezoelectric consoles with various dedicated disposable cutters	1 day practical workshop on cadaver heads
Optics for arthroscopy and instruments	N° 8 optics for arthroscopy of the temporomandibular joint + dedicated instruments (trocars , cannulae and various instruments)	1 day practical workshop on cadaver heads
Material for TMJ Prosthetics	Technical support for Virtual planning of TMJ Prostheses + supply of 11 TMJ prostheses including surgical guides	2 meetings + 1 workshop
Surgical instruments	Surgical instruments (scalpels, forceps, scissors, needle holders, retractors, etc.) + 6 kits of plates and screws for osteosynthesis	1 day practical workshop on cadaver heads
Endoscopic columns	No. 6 monitors, cameras and light sources for endoscopy	1 day practical workshop on cadaver heads
Surgical drill console	N°6 surgical drills with relative handpieces and various dedicated cutters	1 day practical workshop on cadaver heads

With reference to the Technical Sponsors, it is clarified that:

- functioning equipment must be made available in accordance with the law;
- the costs of transport, installation and materials for use will be entirely borne by the sponsoring company;
- the University will not be liable in case of breakage of the equipment;
- the equipment provided will be used by teachers and students.

3. ASSESSMENT

The Commission made up of:

Prof. Salvatore Sembronio - President

Prof. Massimo Robiony - Member

Prof. Mariarosaria Valente - Substitute

Dr. Emanuela Tingling – Recording Secretary

will evaluate the compatibility of the offers received with the event or with institutional purposes of the Institution, will prepare a grid for the allocation of the forms of visibility reported to the previous article, taking



into account what is offered.

The Commission may decide not to accept proposals that are manifestly incompatible with the master/advanced course or with the institutional purposes of the Institution.

The Commission may also decide to evaluate sponsorship offers received after the official closing day of the survey. In this case, however, the presence of the company's logo in the promotional material will not be guaranteed.

4. MEMBERSHIP

Subjects interested in the sponsorship, may send/deliver the completed application form (Attachment No. 1 to this notice):

- by certified mail to: amce@postacert.uniud.it
- by email to: amministrazione.dame@uniud.it
- by registered mail with return receipt to: DEPARTMENT OF MEDICINE - Via Colugna n. 50, Pad. 16 - 33100 Udine (please mark the envelope "SPONSOR COURSE FELLOWSHIP") – the date of RECEIPT stamp will be proof of receipt
- by hand to: DEPARTMENT FROM MEDICINE - Via Colugna n. 50, Pad. 16 - 33100 Udine – Department Secretary's Office 2nd floor (mark the envelope "FELLOWSHIP COURSE")

by 12:00 pm on Wednesday, April 10, 2024

It is recommended to provide in the form all the useful contacts for a better communication.

5. OBLIGATIONS OF THE UNIVERSITY OF UDINE

The Department of Medicine, in return for sponsorship, guarantees the forms of visibility as per Sponsor Prospect.

The Department reserves the right not to activate the initiative in case the minimum number of enrollments expected for the Course has not been reached.

6. LOGO AND COORDINATED IMAGE

The Silver, Gold and Platinum sponsor in return for the sponsorship will allow the use of its logo to the Department for the purposes of the activities referred to in the preceding paragraphs, according to the policies of the University of Udine.

The University will not accept any "standard conditions" provided by the sponsor for the management/licensing of the sponsor's logo and image; any imposition by the sponsor, if deemed wholly or partially unsatisfactory to the University, may be cause for non-acceptance of the sponsorship.

Participating sponsors are not authorized to use the official University logo.



7. IMPLEMENTATION AGREEMENT

The parties (Department and sponsor) will regularize the sponsorship by written agreement containing obligations and benefits of both.

Silver, Gold and Platinum Sponsors will be required to make payment, in a single solution, of the amount offered no later than 30 days from the date of the last signature upon receipt of electronic invoice accompanied by payment advice containing the IUV.

In the event that the Course does not start, as a result of the failure to reach the minimum number of students enrolled, as stipulated in the study manifesto, the fees paid will be promptly refunded.

The Department's obligations are contingent upon the actual payment of the fee by the financial sponsor.

The agreement will expire at the end of the Course on May 31, 2025.

If the sponsorship is subject to corporate constraints (e.g., contract formats and corporate clauses), the Department is willing to evaluate them.

8. INFORMATION

Information and related clarifications to this notice may be obtained from the contact details:

emanuela.pividore@uniud.it - tel. 0432 554202

g.meula.fare@uniud.it – tel +39 – 338 65 64 581

9. ORGANIZATIONAL UNIT

The organizational unit responsible for the process is the Department of Medicine.

The Director of the Department
f.to Prof. Leonardo Alberto Sechi

Attachments:

- Attachment n. 1 Membership and offer form



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Attachment n. 1 – Membership and offer form

Place, date

Messrs
Department of Medicine
Administration service
Via Colugna n. 50, Pad. 16
33100 Udine

Object : Sponsorship offer for the **ADVANCED COURSE “FELLOWSHIP IN TEMPOROMANDIBULAR JOINT SURGERY”** - for the academic year 2024/2025” which will take place indicatively from November 2024 to May 2025.

The undersigned..... born on.....in
.....(prov.....) in the capacity of.....
.....of the Company/Company/Firm/Company.....
.....based in.....Prov.....strett/square.....
.....n.....postcode.....tax code
.....PI n....., with regard to your market
survey for the search of sponsorship for the events in question, communicates that it wishes to accept the offer with a
monetary contribution equal to € (euro) + VAT 22%

- ☐ **Option A**
- ☐ **Option B**
- ☐ **Option C**
- ☐ **Option D**

and/or the following package for Technical Sponsor

- ☐ **Piezoelectric Console**
- ☐ **Optics for arthroscopy and instruments**
- ☐ **Material for TMJ Prosthetics**
- ☐ **Surgical instruments**
- ☐ **Endoscopic columns**
- ☐ **Surgical drill console**

First name

Function.....

Signature



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The undersigned also hereby authorizes the use of the Company/Firm logo in posters, information brochures, initiative website and other communication material created for the purpose of the initiative.

Concurrently with this form, the company logo at the highest possible resolution (preferably in vector format) is forwarded for this purpose.

First name

Function.....

Signature

Useful contacts:

First name

Function.....

Email address

Phone number

Attachment:

- Identity document of the legal representative