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NORTH ATLANTIC TREATY ORGANIZATION ORGANISATION DU TRAITÉ DE L'ATLANTIQUE NORD HEADQUARTERS SUPREME ALLIED COMMANDER TRANSFORMATION 7857 BLANDY ROAD, SUITE 100 NORFOLK, VIRGINIA, 23551-2490



ACT/SPP/TT-1393/Ser:NU 0240

TO: See Distribution

SUBJECT: CALLING LETTER FOR 2019 INTERNATIONAL CONCEPT DEVELOPMENT AND EXPERIMENTATION CONFERENCE

DATE: 10 June 2019

REFERENCE: A. MC Policy for NATO CD&E, MC 0583

1. **Invitation**. In accordance with Reference A, addressees are hereby invited to attend the **2019 International Concept Development and Experimentation (ICD&E) Conference** from **29-31 October 2019**. The Conference will be held at the Novotel Madrid Center, Madrid, Spain.

2. **Overview, Aim, Theme and Content**. The 2019 ICD&E Conference is an annual international event the primary objectives of which are:

a. Champion adaptation and innovation through CD&E work across the Alliance and Partner nations;

b. Advocate and enable a federated approach to concept development and innovation across the Alliance and with Partner nations;

c. Engage with our partners; build relationships and trust, draw inspiration from our colleagues and promote a networked CD&E environment that stimulates collaboration, information sharing and mutual support;

d. Identify and exploit common areas of interest, building communities that can innovate with purpose and coherence;

e. Educate partners on CD&E interests and processes; communicate CD&E best practices and lessons learned for collective benefit;

f. Through workshops and seminars, progress individual workstrands and concepts.

3. The 2019 ICD&E Conference will discuss issues surrounding Innovation, Leadership and Decision Making, complementing themes that will continue through other ACT events, including the NATO Industry Forum (NIF) and the Chiefs of Transformation Conference (COTC). As in previous years, there will be a keynote address, interactive panel discussions, and the 'CD&E Exchange', a mini-expo promoting CD&E initiatives. As well as informing through these plenary sessions, the Conference will be product/output orientated through

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workshops/seminars in support of ongoing projects. Workshops will cover a variety of topics; the following are currently proposed:

a. 'Military Capabilities for Grey Zone Conflicts'. Led by ESP.

b. **'Future Leadership**'. A UK/DEU lead for MCDC.

c. **'Counter-Unmanned Aircraft Systems (C-UAS) – Handbook Refinement/** Validation Experiment'. Led by ACT.

d. **CD&E Toolkit**'. Inform and educate on CD&E in NATO. Led by ACT.

e. 'Artificial Intelligence in Education, Training Evaluation & Exercises (ETEE)'. Led by ACT in collaboration with DEU.

f. **'Military use of Al Automation and Robotics**'. ACT/US lead for MCDC, with the NATO Science & Technology Organisation in support.

g. 'Wargaming'. Led by ACT.

h. (TBC) 'Enabling Coherent Deterrence'. Led By ACT/ACO.

4. **Full details** on the 2019 ICD&E Conference can be found at <u>http://cde.cnf.io</u>. The site is password protected: use the password **STRAWBERRY** for access. Documents available will include the Conference programme and read-ahead material as they become available. For those with TRANSNET access, details and links will also be posted on the <u>CDE365</u><sup>1</sup> pages.

5. **Participation**. The Conference is open to all NATO nations and organizations, Partnership for Peace (PfP), Mediterranean Dialogue (MD), Istanbul Cooperative Initiative (ICI) and Partners Across the Globe, and European Union Military Staff. Attendance is targeted at the FOGOs level and below, with the majority of participants historically at OF-4/5 level. To be eligible for this conference, the nominees should meet the following criteria:

a. **Participants' profiles**. The target audience is military and civilian personnel from MoDs and General Staffs/National HQs, and the EU MS involved in, or tasked to develop, national CD&E programmes, military transformation, research and technology, developing concepts, strategy and doctrine as well as organizing and executing experiments. Preferably, nominees should have knowledge of, or interest in, one of the workshop/seminar topics.

b. **Language proficiency**. The conference will be conducted in English. Translation into other languages will not be provided.

c. **Fees and Registration.** Participants should register for the 2019 ICD&E Conference using the registration link located on <u>http://cde.cnf.io</u>. Registration will open in late-June and will close on <u>21 October 2019</u>. There is a Conference registration fee of **150 EUR** for the event that must be paid online to finalize your registration. This represents an 'early-bird discount'; the conference fee will rise to 180 EUR from 01 October 2019.

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<sup>&</sup>lt;sup>1</sup> <u>https://cde365.transnet.act.nato.int/applications/CDE365.aspx</u>

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6. Accommodations. Guestrooms are available at the Novotel Madrid Center, Madrid, Spain on a first come first served basis. The negotiated price per night is 140 EUR, including breakfast. To access this rate booking should be made through the dedicated hotel conference link provided on the Conference App and during registration. Delegates are responsible for making their own reservations. The rate is only guaranteed until 15 Oct 18.

### 8. **Point of Contact:**

Major Salvatore Falcone, ITA A Project Manager, ICD&E Conference Concept Development Branch Phone: +1 757 747 4054 e-mail: <u>cde-conference@act.nato.int</u>

FOR THE SUPREME ALLIED COMMANDER TRANSFORMATION:

William B. Hickman Major General, USA A Deputy Chief of Staff Strategic Plans and Policy

ANNEXES:

- A. Financial Assistance Request Form
- B. Financial Reimbursement Request Form

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ANNEX A TO ACT/SPP//TT-1393/Ser:NU0240 DATED: 10 JUN 19

# FINANCIAL ASSISTANCE REQUEST FORM

(To be attached by the PfP/MD/PatG partner Nation to the official participation request) -----

ACTIVITY IDENTIFICATION <sup>2</sup>					
Activity name		Concept Developm Concept Developm		Date	29-31 Oct 2019
MDWP reference		ACT.193.23		Place	Madrid, Spain
PARTICIPANT IDENTIFICATION					
Partner Nation				_	
Surname			First name		
Rank/Service			ID/Number		
Official address					
Telephone number			x Number		
		ESTIMATE	OF EXPENDITU	RE	
Travel					0
Accommodation &m	neals				
Others					
Total		to a start of the			
*		BANK IDENTIFIC	ATION FOR REIM	BURSEM	ENT <sup>3</sup>
Beneficiary <sup>4</sup>		1			
Currency requested					
Bank name					
Bank branch name					
Account No⁵.					
SWIFT code <sup>6</sup>					
IBAN code					
Bank Address		>			
		PARTNER NA	TION AUTHORIS	ATION	
Position			Date		
Name Signature					
MCD SENF FM AUTHORISATION					
Number of authorisation			Action officer		
Level of subsidisation	Level of subsidisation		Signature		

<sup>2</sup> As it is in e-PRIME

<sup>3</sup> Unless each cell is completed, we are not able to remit the reimbursement <sup>4</sup> Official name of the bank account holder

<sup>5</sup> If IBAN code is NOT provided, indicate the bank account number in this cell

<sup>6</sup> If IBAN code **is provided**, this cell can be empty

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ANNEX B TO ACT/SPP/TT-1393/Ser:NU0240 DATED:10 JUN 19

# FINANCIAL REIMBURSEMENT REQUEST FORM

(Please provide original receipts to support Partner Nation claim for reimbursement)

## **ACTIVITY AND PARTICIPANT IDENTIFICATION**

Activity	2019 Concept Development and Experimentation (ICD&E) Conference	
PWP/MDWP Reference	ACT.193.23	
Date	29-31 Oct 2019	
Place	Madrid, Spain	
Partner Nation		
Financial Assistance Authorisation Number*		

#### BANK IDENTIFICATION FOR REIMBURSEMENT

Beneficiary**	
Bank	
Account Number	
Currency for Payment	

#### COSTS AND JUSTIFICATION DOCUMENTS (documents - to be attached)

Travel	Travel ticket(s) – copy or original
Accommodation	Bills – original
Meals (based on per diem rate)	Bills
Others / Registration Fee	Bills – original
Combined total costs incurred	-

#### PARTNER NATION AUTHORISATION

Position	
Name	
Date	
Signature	

#### COSTS REIMBURSED\*\*\*

MCD SENF Fund Manager	
Signature	
Date	

<sup>\*</sup>This number is given to the Financial Assistance Request by the MCD (for PfP and MD Partners), after approval of the request.

 <sup>\*\*</sup> Name of the organisation responsible for the visit and holder of the bank account to be credited.
\*\*\* This table to be completed by the MCD (for PfP and MD Partners).