**MPMS-UoB Starter Fellowship 2020/21**

**Application Form**

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| Project Title |  |
| Applicant Name |  |
| Supervisor Name |  |

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| 1. Lay summary of the project (500 words) |
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| 2. What is the purpose of this proposal (300 words) |
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| 3. What is the background? (500 words) |
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| 4. What is the plan of investigation? Include any relevant pilot data, although this is not essential, and highlight any innovative approaches, techniques or technologies that are likely to bring particular benefit (750 words) |
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| 5. What are your detailed plans for further funding for research? Which fellowships or other grants will you seek and how advanced are your applications, please include a detailed plan of milestones to achieve and timescale? (300 words) NB: A list of grant deadlines only is not acceptable. |
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| 6. Provide details of supervisory arrangements for this project\*  (\*Supervisor must be a consultant or scientist within UHB Trust or UoB) |
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| Additional information. |
| **All applicants:**  Do you have the support of your clinical supervisor/manager to undertake this training? Yes / No |
| **Medical applicants only:**  OOPR to be approved |
| **Other Healthcare Professional applicants:**  Application approved by Manager  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature) (Print Name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Position) (Organisation) |
| **Academic Clinical Fellow (ACF) applicants only:**  Please explain why a MPMS-UoB Starter Fellowship is necessary in your preparation in working towards a competitive clinical doctoral training fellowship. |