**NIHR Manchester BRC Pre-Application Fund Application Form**

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| **Section 1: Applicant Information** | |
| Title (Mr, Miss, Mrs, Dr etc.) |  |
| Registered Body (NMC/HCPC etc.) |  |
| First Name |  |
| Surname |  |
| Current Job Title |  |
| NHS AfC Band |  |
| Employing Trust |  |
| Email Address |  |
| Contact Telephone Number |  |
| Name of Authorising Manager |  |
| Authorising Manager Job Title |  |
| Authorising Manager Email Address |  |
| **Section 2: Justification for Pre-Application Support** | |
| Please detail your clinical academic experience to date. This can include programmes of research, monies awarded, publications and wider experiences (e.g., networks, committees). Limit: 1,000 words. | |
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| What are your future career ambitions? What are areas of your research that you are interested in developing your knowledge in, which align with the Manchester BRC Clusters and Themes? Limit: 500 words | |
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| What future NIHR fellowship/grant do you intend to apply for? What is your training and development plan, and how will this support your career development? Why now is the right time to prepare an application for the selected scheme? Limit: 500 words. | |
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| Describe how the Pre-Application Support Fund will help you in preparing a stronger application for the NIHR fellowship/grant. What are the key activities you are seeking funding for? (Examples may include salary contributions, training & development, patient public involvement activities etc). Limit: 800 words | |
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| Research Support: Please could you specify up to 4 individuals who will support and give direction on your research and how they will contribute. Limit: 500 words. | |
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| Collaborations: Please state any collaborations you have in place or wish to establish through this award? These can be individuals to act as future supervisors/mentors or networks that are outside those supporting your application. Limit: 500 words. | |
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| How much funding are you requesting? Provide an estimated budget and breakdown of costs. Please note: salary contributions can be no more than £10K. | |
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| Detail the timeline in which you plan to utilise the fund (*e.g.* expected dates for preparatory activities, workshops). | |
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| Provide the anticipated submission date for the full future NIHR grant application. | |
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| **Declaration** | |
| Applicant Signature | |
| *(electronic acceptable):* | |
| Line Manager Signature | |
| *(electronic acceptable)* | |