

JOINT RESEARCH EXECUTIVE SCIENTIFIC COMMITTEE

**FORM OF APPLICATION FOR A RESEARCH GRANT
TO THE NEWCASTLE UPON TYNE HOSPITALS NHS CHARITY**

(v.04/18)

All applicants are encouraged to read the Guidance Notes carefully before submission.

Q1	Lead Applicant (a summary CV, no more than 2 pages in length, must be attached - the template is found at the end of this form)	
	Appointment Held	
	Department/Institute	
	Hospital/University	
	Address for Correspondence	
	E-mail	
	Telephone Number	
Q2	Co-applicants <i>(name, position and affiliation; if the application is to fund part of the salary of an identified junior doctor or scientist, a CV of no more than 2 pages should be completed for that individual, using the template at the end of this form)</i>	
Q3	Where will the work be carried out? <i>(which hospital and/or university dept or institute)</i>	
Q4	Title of Project	
Q5	Period of Support (max 24 months)	
Q6	Proposed Start Date	
Q7	Total Support Requested	

Q8 Please list support given to ANY of the named applicants from the JRESC/Trustees within the last 5 years. Please indicate outcomes (eg publications or grant/fellowship funding or patents/intellectual property directly related to the JRESC award) and impact arising from such awards (not more than 300 words; for publications please provide references, for grants/fellowships please provide name of funder, title of grant, amount awarded, and dates of funding; for patents please provide relevant information).

Q9 What is your Research question/hypothesis? (not more than 100 words)

Q10 Summary of Proposed Research including key goals (not more than 250 words)

Q11 Why is the proposal important for the health of patients in Newcastle upon Tyne? (not more than 200 words)

Q12 Details of Research Project (not more than three A4 pages)

This section may be supplied as a 3-page attachment. Please divide your document into the following sections:

- (a) Background, aims and objectives
- (b) Work which has led up to the project (including pilot data)
- (c) Experimental design and methods
- (d) Timetable and milestones
- (e) Justification for financial support.

Q13 Explain how this work is intended to pump prime future grant proposals to continue this line of investigation (not more than 200 words)

Q14 Summary, in simple language for the non-expert (including the research question, of why it is important for the health of patients in Newcastle upon Tyne, an overview of the experimental approach, key goals and why this is likely to lead to external funding if appropriate, not more than 200 words)

Q15 References (full citation)

Q16 Financial Support Requested			
<p>*** Please ensure that you request help with finances EARLY in planning your application. For university-led applications please contact the Research Support Officer(s) in your research institute.</p> <p>For Trust-led applications go through the Research and Innovation Hub (layla.mcmullen@nuth.nhs.uk or kirsten.allanson@nuth.nhs.uk)</p> <p>If your application involves University and Trust costings, take advice from your primary point of contact, as above.***</p>			
Salaries (inclusive of Superannuation and National Insurance)	First Year £	Second Year £	Total Over Period £
(a) Medical or Dental Staff Grade and Pay Scale % WTE			
(b) Research Staff Grade and Pay Scale % WTE			
(c) Technical Staff Grade and Pay Scale % WTE			
(d) Clerical/Secretarial Staff Grade and Pay Scale % WTE			
(e) Advertising/Recruitment			
(f) Materials and Consumables (please list)			
(g) Equipment			
(h) PPI/E costs			
<u>TOTAL SUPPORT REQUESTED</u>			

Q17 Other Financial Support

Is this or a related application currently under consideration elsewhere? YES/NO

If yes, where and when is a decision expected?

Q18 Have you applied for matched funds?

Yes / No

If Yes, where and when is a decision expected?

Q19 Ethical Approval *(delete as appropriate)*

(a) Does the project involve human subjects, clinical specimens or patient data? YES / NO

If YES, provide the approved REC reference number that specifically covers work to be undertaken in this proposal (if awarded), or indicate why this is not available. Please note that funding for clinical studies is conditional upon ethics approval being obtained:

(b) Does the project involve work on animals? YES/ NO

If YES please supply relevant Home Office Project Licence number and name of Project Licence holder that specifically covers work to be undertaken in this proposal (if awarded), or indicate why this is not available. Please note that funding for animal work is conditional upon the required licences being in place:

Q20 Confirmation of appropriate costings *(delete as appropriate)*

It is expected that costings will have been done through the MyProjects Proposals system (for university-led applications) or using the NuTH Costing Template (for NuTH-led applications). One or both of the questions below should therefore be answered "yes". If you have any queries, the relevant contacts are outlined at the top of the section relating to Q16, above.

(a) Has the application been costed and approved through the MyProjects Proposals system?
YES / NO / NOT APPLICABLE

If YES, please provide the relevant BH reference number:

If NO, please explain why this is the case:

(b) Has the application been costed and approved using the NuTH Costing Template?

YES / NO / NOT APPLICABLE

If YES, please quote ReDA reference number:

If NO, please explain why this is the case:

Q21 For studies involving patients, do you have Health Research Authority (HRA) approval for the study? (www.hra.nhs.uk/)

Has the project been submitted to the Trust's R&D Department for approval?
YES/NO/NOT APPLICABLE

If YES, please quote the reference number:

If NO, please note that funding for clinical studies is conditional upon this being obtained.

Q22 If successful, who will be responsible for administering the grant?

(applications with no authorising signature will not be considered)

(Delete one) Trust/University

Authorising signature.....

Q23 Signatures

(applications with no authorising signature will not be considered)

- a) For projects to be carried out partly/entirely in NHS facilities.
This application includes appropriate costs likely to be incurred by the Trust during the study.
Signature (Clinical Director)
- b) For projects carried out party/entirely in University facilities.
This application includes appropriate costs likely to be incurred by the University during the study.
Signature (Head of Institute)

SIGNED AND DATED BY LEAD APPLICANT
(name, signature date):

MODEL CURRICULUM VITAE:

Personal Details

Name:

Professional Address:

Qualifications:

provide year and name of undergraduate degrees, postgraduate degrees and membership/fellowship details (eg MRCP(UK)/FRCS etc).

Appointments (*i.e.* professional posts)

Provide post, grade and dates for all employment since graduation (include career breaks where applicable).

Up to 5 Publications from the last 5 years

Please provide all authors, title, journal, year, volume, pp.

Grants

Please provide up to 3 most relevant grant awarded in the last 5 years (as lead or co-applicant), listing the name of the funder, the name of the lead applicant for the grant (and their host institution), the title of the grant, the amount rewarded, the date of award, duration and (where known) the grant reference number. In addition, please provide details of all JRESC awards to the lead applicant, regardless of year.