**Wellcome Prime Award - Application Form**

Please email completed application forms to sara.sleigh@nottingham.ac.uk by  
**Tuesday 30th May 2017**

|  |  |  |
| --- | --- | --- |
| 1. **DETAILS OF APPLICANT** | | |
| **Name** |  | **Title:** |
| **School** |  | |
| **Email address** |  | |
| **Phone number** |  | |
| **ORCID ID** |  | |
| **Date of appointment to lectureship** |  | |
| **Career breaks**  Have you had any career breaks of periods of part-time work? Please provide details |  | |

|  |  |  |
| --- | --- | --- |
| 1. **APPLICANT’S GRANT FUNDING RECORD**   *Provide details of any funding received to date in which the Applicant is Principal Investigator or Co-Investigator. Duplicate the rows where more than one grant has been awarded.*  *Please refer to the application guidance for eligibility criteria* | | |
| **Project title** |  | |
| **Funder and award dates** | (from DATE to DATE) | |
| **Total award** | £ | **PI or Co-I?:** |
| **Project title** |  | |
| **Funder and award dates** | (from DATE to DATE) | |
| **Total award** | £ | **PI or Co-I?:** |
| **Project title** |  | |
| **Funder and award dates** | (from DATE to DATE) | |
| **Total award** | £ | **PI or Co-I?:** |

|  |
| --- |
| 1. **APPLICANT’S PUBLICATION RECORD**   *List up to ten of your most significant peer-reviewed publications, preprints, or other scholarly research outputs, e.g. patents relevant to this application.*  *Publications should be in chronological order with the most recent first. Please give citation in full, including title of paper and all authors\*. Citations to preprints should state “Preprint”, the repository name and the articles persistent identifier (e.g DOI). (\*All authors, unless more than 10, in which case please use ‘et al’, ensuring that your position as author remains clear.)*  *Place an asterisk in front of the three publications you consider to be your best.* |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| 1. **PROJECT DETAILS**   *Duration should be between 12-24 months; project start date should be in September 2017, unless justification is given.* | |
| **Project Title** |  |
| **Duration (months)** |  |
| **Start Date** |  |
| **Total Funding Requested (£)** |  |

|  |
| --- |
| 1. **LAY SUMMARY**   *Please provide a summary of your proposed research that people who may not be familiar with the subject can understand. We may use this summary of your research on our website and elsewhere.*  *Max 200 words* |
| Word count: |

|  |
| --- |
| 1. **PROJECT OUTLINE**   *Detail (a) Key goals and research questions; (b) Work which has led up to the project; (c) Approach and how challenges would be addressed; (d) Key stages in your research plans, indicating location and timelines, if known.*  *Max 700 words* |
| Word count: |

|  |
| --- |
| 1. **PERSONAL STATEMEMT**   *Summarise how this Wellcome Prime Scholarship will further your research and career aspirations, and its context in your longer-term vision.*  *Max 300 words* |
| Word count: |

|  |
| --- |
| 1. **PUBLIC ENGAGEMENT**   *Please provide a brief outline of your public engagement plans.*  *Max 100 words* |
| Word Count: |

|  |
| --- |
| 1. **FIT TO WELLCOME TRUST REMIT**   *Please give details of how your research fits within the Wellcome Trust’s remit.*  *Max 100 words* |
| Word Count: |

|  |  |
| --- | --- |
| 1. **SUMMARY OF RESOURCES REQUESTED**   *Please summarise the costs requested. Ensure that the total is correct and that it matches the total given in section 4. For costs which are in foreign currencies, note the exchange rate used and list the GBP price.*  *Note: if funds are not to be used for teaching buy-out the maximum award available is up to £20,000 per year.* | |
| ITEM | COST (£) |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| TOTAL |  |
|  | |
| *Please provide a brief justification of the resources requested. Wherever possible please also break down costs to show how totals have been calculated.*  *Max 100 words* | |
| Word count: | |

|  |
| --- |
| 1. **SIGNATURES AND AUTHORITY TO APPLY** |
| Applicant |
| Name Signature & Date |
| Head of School: confirmation that project costs are correct and that the School commits to providing the required matched funding to support the proposed research |
| Name Signature & Date |