

**Research Grant Application Form**

Before completing this form, please refer to the following pages on our website:

* [Research Grant Conditions](https://www.ms-research.org.uk/for-ms-professionals/our-resarch-grants/research-grant-conditions.html)
* [Grant Application Guidance Notes](https://www.ms-research.org.uk/for-ms-professionals/our-resarch-grants/grant-application-guidance-notes.html)

Return your completed form to Abigail Wiltshire at abi.wiltshire@ms-research.org.uk.

Please also let us know if you require any further help or advice.

PLEASE NOTE:

* We will not review incomplete applications.
* Responses exceeding the stated word limit will be truncated before being sent to reviewers.

|  |  |
| --- | --- |
| **Project Title (max 20 words)** |       |

|  |  |
| --- | --- |
| **Proposed Start Date (DD/MM/YYYY)** |       |

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| --- | --- |
| **Proposed Project Duration (months)** |       |
| **Total Estimated Funding Requested (£)** |       |

# SECTION 1: Details of Applicants

## 1.1 Lead Applicant Details

|  |  |
| --- | --- |
| **Title** |       |
| **Full Name** |       |
| **Job Title** |       |
| **Work Address** |       |
| **Post Code** |       |
| **Email** |       |
| **Role in study** |       |
| **Main Point of Contact (POC)** |       |
| **POC Tel** |       |
| **POC Email** |       |

## 1.2 Co-applicant Details

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Co-applicant 1** | **Co-applicant 2** | **Co-applicant 3** |
| **Title** |       |       |       |
| **Full Name** |       |       |       |
| **Job Title** |       |       |       |
| **Work Address** |       |       |       |
| **Post Code** |       |       |       |
| **Email** |       |       |       |
| **Tel** |       |       |       |
| **Role in Study** |       |       |       |

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| **If there are more than three co-applicants, please provide further details for each additional co-applicant below.** |
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## 1.3 Collaborators

If relevant, please provide the names of any researchers (and their research institutes) who would be collaborating on the project but are not named as co-applicants.

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| --- | --- |
| **Collaborator Name** | **Research Institute** |
|       |       |
|       |       |
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# SECTION 2: Your Proposed Study

## 2.1 Study Background

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| 1. **Brief description of the project** (max 500 words)
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|       |
| 1. **Briefly describe any literature searches you have made that are relevant to this application** (max 500 words)
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|       |
| 1. **Are you aware of any similar or competing research? Please give details.** (max 300 words)
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|       |

## 2.2 Scientific Summary

|  |
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| 1. **Study Design and Methodology** (max 2000 words)
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|       |
| 1. **Risk Management** (max *300* words)
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|       |

## 2.3 Relevance to the MS Community and Potential Impact

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| **Explain how your research project is relevant to the MS community**(max 500 words) |
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## 2.4 Lay Summary

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| **Describe your project without jargon for non-experts** (max 500 words) |
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## 2.5 Public and Patient Involvement (PPI)

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| --- |
| **Detail PPI activities For further guidance on PPI** [see NIHR guidelines](https://www.spcr.nihr.ac.uk/PPI/what-is-patient-and-public-involvement-and-engagement) (max 300 words)  |
|       |

## 2.6 References

|  |
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| **List all references quoted in your application** |
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# SECTION 3: Finance

Please list the funding costs for this project. You must complete this with the help of your R&D Department and Research Finance Office.

## 3.1 Financial Breakdown of Support Requested

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Year 1** | **Year 2** | **Year 2** | **Additional years (where required)**  |
| **Staff Salaries** (including oncosts and likely pay rises) |       |       |       |       |
| **Travel and Subsistence** |       |       |       |       |
| **Equipment** |       |       |       |       |
| **Consumables** |       |       |       |       |
| **Other** |       |       |       |       |
| **Total Requested** |       |       |       |       |

## 3.2 Justification of Costs

|  |
| --- |
| Please justify the costs listed above(max 500 words) |
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## 3.3 Additional Funding

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| Please disclose any alternative funding you are seeking for this project or related research proposal(max 300 words) |
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# SECTION 4: Other Considerations

## 4.1 Intellectual Property

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| Will this project generate Intellectual Property? |
| [ ]  Yes [ ]  No  |
| If yes, please provide details of how this will be managed. (max 150 words) |
|       |

## 4.2 MHRA Approval

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| Does your project require MHRA approval? Please refer to [Regulatory guidance for medical devices](https://www.gov.uk/government/collections/regulatory-guidance-for-medical-devices) |
| [ ]  Yes [ ]  No  |
| If yes, please provide details. (max 150 words) |
|       |

## 4.3 Project Schedule and Milestones

In a separate document, please provide a **Gantt chart** to be submitted with your application.

## 4.4 Related Studies

|  |
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| Please explain how this proposed project fits with any ongoing project(s) and how it may impact the delivery of these (max 300 words)  |
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# SECTION 5: Further Information

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| Please detail any other information that you would like to provide in support of this application (max 300 words) |
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# SECTION 6: Declarations

For this section, please upload scans or photos of the signatures required.

## Lead Applicant

|  |
| --- |
| I have read the conditions set out by MS Research Treatment & Education and agree to abide by them if my application is successful. I shall be actively engaged in and take full control of the project. I agree to comply with standards set out in the [UK Framework for Health and Social Care Research](https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/uk-policy-framework-health-and-social-care-research/).Signature of Lead Applicant:  |
| Name:       | Position:       |
| Organisation:       | Date (dd/mm/yyyy):       |

## Head of Department

|  |
| --- |
| I confirm that I have read this application and, if funded, the work will be accommodated and administered in the Department/Organisation. I will ensure procedures are in place to manage and monitor the research in accordance with the [UK Framework for Health and Social Care Research](https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/uk-policy-framework-health-and-social-care-research/)Signature of Head of Department:  |
| Name:      Position:       |  |
| Organisation:      Email:       | Date (dd/mm/yyyy):      Tel:       |

## Finance Officer

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| I confirm that I have read this application and that, if funded, the work will be administered in the Department/Organisation. The staff grades and salaries quoted are correct and in accordance with the normal practice of this organisation.Signature of Finance Officer:  |
| Name:      Position:       |  |
| Organisation:      Email:       | Date (dd/mm/yyyy):      Tel:       |

# SECTION 7: Curriculum Vitae

Please provide a CV for the Lead Applicant and each additional Co-Researcher.

## Lead Applicant

|  |  |
| --- | --- |
| Surname:       | Forename (s):       |
| Qualifications:      |
| Experience in post and relevant post-registration courses attended:      |
| Recent Publications (up to six references):      |

## Co-applicant 1

|  |  |
| --- | --- |
| Surname:       | Forename (s):       |
| Qualifications:      |
| Experience in post and relevant post-registration courses attended:      |
| Recent Publications (up to six references):      |

## Co-applicant 2

|  |  |
| --- | --- |
| Surname:       | Forename (s):       |
| Qualifications:      |
| Experience in post and relevant post-registration courses attended:      |
| Recent Publications (up to six references):      |

## Co-applicant 3

|  |  |
| --- | --- |
| Surname:       | Forename (s):       |
| Qualifications:      |
| Experience in post and relevant post-registration courses attended:      |
| Recent Publications (up to six references):      |

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| **If there are more than three co-applicants, please provide CVs for them on separate pages.** |
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