**GRANT APPLICATION FORM 2022**

Please read the application guidance and research strategy prior to completing this application form.

Applications should be submitted electronically to [awardsadmin@vasculitis.org.uk](mailto:awardsadmin@vasculitis.org.uk) by **17.00** on **Friday 7th October 2022**. Applications received late will not be considered.

|  |  |
| --- | --- |
| Applicant's name |  |
| Appointment |  |
| Institution and address | |
|  | |
| Applicant's e-mail |  |
| Applicant's signature |  |
| Brief title of application | |
|  | |
| Brief description of support required | |
|  | |
| Total costs requested |  |
| Proposed starting date |  |
| Proposed duration |  |
|  |  |
| Co-Applicant 1 Name |  |
| Appointment |  |
| Institution |  |
| Co-Applicant Signature |  |
| Co-Applicant 2 Name |  |
| Appointment |  |
| Institution |  |
| Co-Applicant Signature |  |
|  |  |
| Co-Applicant 3 Name |  |
| Appointment |  |
| Institution |  |
| Co-Applicant Signature |  |
|  |  |
| Head of Dept. Name |  |
| Email Address |  |
| Postal Address (if different from the applicants) |  |
| Signature |  |
|  |  |
| Administrative Authority Name |  |
| Administrative Authority's e-mail address |  |
| Appointment and postal address if different from the applicant's) |  |
| Signature |  |

This section should be a maximum of **six pages** of A4 **(using this pro-forma)** which should consist of a detailed submission under each of the following headings:

|  |
| --- |
| Introduction (please detail the background that led to the formulation of the project) |
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| Description of the project in lay terms |
|  |
| Objectives |
|  |
| Detailed project description  (An adequate description of details of the experimental design required. \*\*Please include power calculations if applicable) |
|  |
| Please describe the need for the research you are proposing, and how it links to the VUK research strategy |
|  |
| Please describe the impact the research will generate and how you plan to utilise this |
|  |
| Please detail the meaningful Patient and Public Involvement that has gone into developing and planning this application, and/or will take place during the study |
|  |
| Facilities available |
|  |
| Facilities required |
|  |
| Tabulated breakdown of budget costs associated with the project |
|  |
| Justification of the finances requested and explain the relevance to Vasculitis UK |
|  |
| List all current grants held by the applicant (Please explain how this application relates to other funding. \*\*see guidelines) |
|  |
| State whether the present application has been submitted elsewhere (if so please state the outcome) |
|  |
| Scientific References to the text |
|  |

**PLEASE INCLUDE THE FOLLOWING ESSENTIAL ADDITIONAL INFORMATION**

1) Curriculum vitae of applicant(s) with a list of relevant publications during the last 5 years and a statement of how many hours per week the applicant(s) will spend on this work. (\*\*This should be completed on 1 page of A4 per applicant)

2). Regulatory Committee Approval - if appropriate (see guidelines)