

Q9 DETAILS OF OTHER CURRENT GRANTS HELD BY APPLICANT(S)

State name of awarding body, title of project, amount awarded, dates of support and proportion of time spent on each project.

NAME OF APPLICANT:

Q10 DETAILS OF RESEARCH PROJECT

Include (a) Aims of the project, (b) Work which has led up to the project, (c) Experimental design and methods to be used in investigating this problem.

NAME OF APPLICANT:

NAME OF APPLICANT:

NAME OF APPLICANT:

NAME OF APPLICANT:

Q11 REFERENCES

(Research Project)

This page may be duplicated to allow applicants to use more than one sheet if necessary. **Please give citation in full, including title of paper and all authors.**

Q12 RESEARCH ON HUMAN PARTICIPANTS OR HUMAN TISSUE

- (a) Does your project involve the use of human participants or human tissue? YES NO
 If yes, refer to notes.
 If the project includes studies on patients being cared for by the NHS, please also answer Q13.
- (b) Does your project involve the use of human participants or other human tissue, outside the UK? YES NO
 If yes, refer to notes.
- (c) Does your project involve the use of human embryos requiring a licence from the Human Fertilisation and Embryology Authority (HFEA)? YES NO
 If yes, refer to notes.
- (d) Does your proposal involve research on gene therapy which requires regulatory approval? YES NO
 If yes, refer to notes.

Q13 RESEARCH USING NHS FACILITIES OR PATIENTS

- (a) In the course of your project, do you propose to use facilities within the National Health Service and/or does your research involve patients being cared for by the NHS? YES NO
 If yes, is your project in accordance with the principles of the Statement of Partnership on Non-Commercial R&D in the NHS in England (or the corresponding statements in Northern Ireland, Scotland and Wales), distributed with Department of Health EL(97)77, dated 27 November 1997 (a link to this site can be found in the associated guidance notes). YES NO
- (b) Which NHS provider(s) has agreed to facilitate this research?

Q14 EXPERIMENTS ON ANIMALS

- Do your proposals involve the use of animals or animal tissue? YES NO
- (a) Do your proposals include procedures to be carried out on animals in the UK which require a Home Office licence? YES NO
 If yes, refer to notes
- (b) Does the institute where the animal work is to be carried out hold a certificate of designation under the Animals (Scientific Procedures) Act 1986? YES NO
- (c) Do your proposals involve the use of animals or animal tissue outside the UK? YES NO
 If yes, refer to notes

Q15 COMMERCIAL EXPLOITATION

- (a) Will the proposed research use technology, materials or other invention that, as far as you are aware, are subject to any patents or other form of intellectual property protection? YES NO
If yes, give brief details.

- (b) Is the proposed research, in whole or in part, subject to any agreements with commercial, academic or other organizations? YES NO
If yes, give brief details.

- (c) Is the proposed research likely to lead to any patentable or commercially exploitable results? YES NO
If yes, give brief details.

- (d) If any potentially commercially exploitable results may be based upon tissues or samples derived from human participants, please confirm that there has been appropriate informed consent for such use.

NAME OF APPLICANT:

Q16 ACCESS TO RADIATION SOURCES

(a) Will the proposed research require access to either the Synchrotron Radiation Source (SRS) at Daresbury or the European Synchrotron Radiation facility (ESRF) at Grenoble? YES NO

If yes, please complete the table below, providing details of beam time requested and scheduling information (anticipated usage in days). [Beam time is counted in whole days only].

| Synchrotron | Station | Special requirements (single bunch, other specify) | Total number of days | Number of days per annum | | | | |
|-------------|---------|--|----------------------|--------------------------|--------|--------|--------|--------|
| | | | | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
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(b) Please justify the stations and beam time requested (no more than 500 words).

(c) Will the proposed research require access to a neutron source? YES NO
 If yes, complete Q16(a) and (b) above indicating that it is a neutron source that is required and Q23(e) detailing the costs required.

NAME OF APPLICANT:

Q17 RELATED APPLICATIONS

- (a) Is this or a related application currently being submitted elsewhere? YES NO
 If yes, to which organisation?
 By what date is a decision expected? (dd/mm/yyyy)
- (b) Has this, or a similar, application been submitted elsewhere over the past year? YES NO
 If yes, to which organisation?
 What was the result?
- (c) What proportion of working time do the Principal Applicant and Coapplicant(s) spend on research? (%)
 What proportion of this time will be spent on the project by the Principal Applicant and Coapplicant(s)? (%)
- (d) Will the research project be undertaken in a Wellcome Trust Clinical Research Facility? YES NO
 If yes, please specify:
- (e) Will the research project be undertaken in a Wellcome Trust Centre? YES NO
 If yes, this application should be accompanied by a letter of support from the Director of the Centre.

Q18 CONSULTANCIES AND EQUITIES

Do any of the applicants have consultancies or any equity holdings in companies or other organizations that might have an interest in the results of the proposed research? YES NO

If yes, refer to notes and give brief details.

Q19 CURRICULUM VITAE OF APPLICANT(S)

This page should be duplicated if there is more than one Applicant/Coapplicant

(a) Surname: Date of birth:
Forenames: Nationality:

(b) Degrees, diplomas etc. (subject, class, university and dates):

(c) Current post (with dates):
Title of Post:
Department:
Institution:
Date of appointment and if appropriate, expected termination:

(d) With whom do you have your contract of employment?

(e) Source of personal salary support (please mark appropriate box):
HEFC NHS Other (Please specify and refer to notes)

Please also be specific if salary is funded from more than one source.

(f) Current salary (if salary is being requested from the Trust):

(g) Last 3 posts held (with dates):

NAME OF APPLICANT:

Q19 CURRICULUM VITAE OF APPLICANT(S) cont

- (h) Recent publications (no more than ten which should be those you consider to be the most important and relevant to this application. Please give citation in full, including title of paper and all authors.)
Applicants requesting a period of Research Leave may provide a full list of publications to date.

Q20 CURRICULUM VITAE OF NAMED RESEARCH ASSISTANT

This page may be duplicated if more than one research assistant is required.

(a) Surname: Date of birth:
Forenames: Nationality:

(b) Degrees, diplomas etc. (subject, class, university and dates):

(c) Current post (if not currently in employment, please give details of most recent post):
Position and grade:
Department:
Institution:
Funding body:
Termination date of support:
Current basic salary and incremental date:
Basic salary must be shown separately from any salary enhancements or other allowances.
If currently funded by a Trust grant, please give grant reference number:

(d) Previous posts (with dates):

(e) Recent publications (No more than five. Please give citation in full, including title of paper and all authors.)

Q21 REASONS FOR SUPPORT REQUESTED

On this page justify (a) Research Leave

(i) Please state the percentage of time/hours per week you currently spend on:

- Teaching
- Administration
- Clinical duties
- Other (please detail)

(ii) Scientific justification for Research Leave and details of your contribution to the project

(iii) Statement of support by Head of Department

Q21 REASONS FOR SUPPORT REQUESTED (Cont.)

On this page justify (b) Staff requested.

Q21 REASONS FOR SUPPORT REQUESTED (Cont.)

On this page justify (c) Materials and consumables and, (d) Miscellaneous costs.

Q21 REASONS FOR SUPPORT REQUESTED (Cont.)

On this page justify (e) Equipment, equipment maintenance and access charges.

For access charges, please show how they have been calculated on a cost recovery basis. This can include (i) a maintenance or service contract providing a basic level of service, (ii) running costs, (iii) materials and consumables and (iv) staff time. Please also state the percentage of time/number of hours the equipment/facility will be used for the project.

Q21 REASONS FOR SUPPORT REQUESTED (Cont.)

On this page justify (f) Animals.

- (i) Why is animal use necessary: are there any other possible approaches?
- (ii) Is the species to be used the most appropriate? This is especially important when an animal is being used as a model for a human physiological or pathological condition.
- (iii) The experimental design should include the case for the number of animals required to achieve significance and the factors that might affect this. The sample size calculations used to estimate the number of animals required in the proposed experimental design should be stated where appropriate.

Q22 REQUESTS FOR ANIMAL COSTS

| (a) Animal species Indicate species of animal used: | | | | | |
|---|--------|--------|--------|--------|--------|
| | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| (b) Purchase Number to be purchased per annum Source of supply and biological quality Purchase price per animal | | | | | |
| (c) Maintenance Number of animals to be maintained Number of weeks' maintenance required Cost per animal per week | | | | | |
| (d) Experimental procedures Types of procedure | | | | | |
| Cost per procedure(s) | | | | | |