**HSC Research and Development Division/HEE/ICA Bridging Scheme – Pre Doctoral Support**

**Application Form**

***(Please refer to guidance document when completing this form)***

**Data Protection Statement**

By submitting this form you are consenting to HSC R&D and NHS R&D NW using the information provided from time to time for the purposes of exploring the clinical academic development programme operating across the North of England and Northern Ireland. The information that you provide on your application form will be used for the following purposes:

* To enable your application for entry to be considered and allow our recruitment team, where applicable, to assist you through the application process;
* To enable us to compile statistics, or to assist other organisations to do so about clinical academic careers. No statistical information will be published that would identify you personally;
* To enable us to initiate your Award record should you be offered a place on the programme.

**Please send an electronic copy of this form by 2pm Tueday 26th March 2024 to**

[**Sorcha.finnegan@hscni.net**](file:///C%3A%5CUsers%5Csfinn008%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5CEGTZ3C4I%5CSorcha.finnegan%40hscni.net)**. Interviews will be held provisionally on 9th April 2024 via Teams.**

1. **Personal Details (please complete all fields)**

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| --- | --- |
| **Lead applicant:***Title, Forename, Surname,*  |  |
| **Address for correspondence:** |  |
| **E-mail address:** |  |
| **Mobile number/s:** |  |
| **Current Position/Role:** |  |
| **Name of current employing organisation:** |  |
| **Are you employed by an organisation whose core business is delivery of health and/or care as a primary aspect of your professional role in the YES / NO**  |
| **Are you a member of an** [**ICA eligible profession**](https://www.nihr.ac.uk/documents/heenihr-ica-programme-eligible-professions-and-regulators/12204)**?** **Programme approved regulatory body:** **Registration number:** |
| **Department(s) hosting this research training fellowship:** |  |
| **Please provide a brief summary statement (200 words maximum) of how your post is divided between practice, administrative/managerial, teaching and research duties (as relevant):** |  |

**Academic Qualifications (Diploma, Degree and research /clinical related awards):**

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| --- | --- | --- |
| Qualification  | Date | Institution |
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**Publications if relevant (published, in press, under review or in preparation presented in order: list all authors, article title, publication name, publication year, volume and pages)**

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**Prizes, awards or other relevant esteem indicators:**

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| --- | --- | --- |
| Date | Title | Awarding Body |
|  |  |  |
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**Research Grants: (only include grants for which you are a lead or named applicant)**

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| --- | --- | --- | --- | --- |
| Title of grant and awarding body | Role in Research Grant | Total value £ | Start date | End date |
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**Research experience to date: Please describe any relevant research experience and how a fellowship will further your career (max 300 words)**

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**What are your career aspirations should you be successful with this award (max 500 words)**

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1. **Proposed project**

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| **In 100 words can you tell us why this research is important and broadly how you aim to achieve this.** |
|  |
| a) Please give an outline of your research proposal that you intend to develop into a doctoral fellowship application including background, aims/objectives and proposed methods. (max 1,000 words) |
|  |
| b) How will patient/client care be improved through your research interest? You should draw on the NIHR remit and HSC priorities (max 500 words) |
|  |
| c) What have you done thus far to inform this specific research project? Please include any exploratory work, PPI, supervision etc. (max 500 words) |
|  |
| d) Given your progress to date, what specific aspects of your application for a doctoral fellowship within 6-12 months do you need help with (max 500 words) e.g. patient and public involvement, methodological advice. Please familiarise yourself with [Guidance notes for Doctoral Fellowship scheme](https://research.hscni.net/fellowship-awards#HSC%20Doctorals) to obtain an idea of the different aspects which will need to be addressed when preparing an application  |
|  |
| e) How do you propose to use this award to develop your doctoral fellowship application (max 500 words). You need to give a broad outline of milestones and how you intend to manage the available time. A Gantt chart can be submitted as an attachment, if you wish. |
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1. **Supervisor**

**Have you identified an academic supervisor to support your proposed research and clinical academic development? YES / NO**

If ‘yes’ please provide further details below (please duplicate this page for additional supervisors).

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| --- |
| Name: |
| Describe the work with your supervisor so far: |
| Profession: |
| Current position:  |
| Address (work): |
| Email: | Telephone: |
| Publications relevant to the proposed project: |
| Describe the nature and extent of your engagement with your proposed supervisor to date: |
| **Postgraduate research (PGR) student supervision**Number of students supervised to completion at MPhil/MRes: Number of students supervised to completion at PhD: Number of current PGR students: |

**English language competence – To be completed only by students educated outside the UK where English is not the first language.**

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| Students educated outside the UK in countries where English is not the first language must provide, before they can be admitted to the programme, evidence that they have sufficient command of both spoken and written English. Acceptable evidence includes: GCSE/O-level English Language at grade C or above; an overall score of 6.0-6.5 in the British Council IELTS test; a score of 600 (80/90 IBT) in TOEFL, with a score of 4.0 in the Test of Written English (TWE). You will be required to submit originals or certified copies of any certificates and score reports. |
| **a) Is English your first language? YES / NO** |
| **b) Is/was English the language of instruction of your first degree? YES / NO** **If yes, please provide written confirmation from the institution where you undertook your studies, that English was the language of instruction.** |
| c) Please list any formal English Language qualifications with results obtained (i.e. IELTS, TOEFL, GCE, GCSE) and the dates you took the test, or will be taking the test. |
| **English Qualification** | **Result** | **Date** |
|  |  |  |
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1. **Signatures (electronic signatures are acceptable)**

**Declaration and signature by applicant**:

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| I confirm that the details and information given on this application form are correct and accurate and no information requested or other material information has been omitted.  |
| Applicant’s signature:Date:  |

**Supporting statement from employer**

**The person who is your line manager must sign this form. HSC R&D Divsion will pay the HSC employer £7,000 to cover costs including salary backfill for protected time release of up to 50% of the applicants HSC contracted hours.**

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| --- |
| Applicant Name: |
| I can confirm that the above applicant has discussed this application. I understand that this is funding to support the development of a clinical academic career to enable them to continue with research in their role. I am supportive of their application for the award and will release the applicant for protected time days of the award  |
| Line Manager Signature: | Date: |
| Line Manager Name: | Position: |
| Address: |
|  |
| Post code: |
| Telephone number: | Email: |

**Deadline for submission is 2pm Tueday 26th March 2024.**

**Completed and signed applications must be emailed to** [Sorcha.finnegan@hscni.net](file:///C%3A%5CUsers%5Csfinn008%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5CEGTZ3C4I%5CSorcha.finnegan%40hscni.net)