**NIHR Imperial Biomedical Research Centre (BRC)**

**APPLICATION FORM –** **IMMUNOLOGY FELLOWSHIP 2024**

Completed applications are to be submitted by email to: [antonia.gould@imperial.ac.uk](mailto:antonia.gould@imperial.ac.uk)by 5pm 28th June 2024 for consideration in the July Theme Meeting.

Sections 4, 7 and 8 will be reviewed by Community Partners and so please ensure to use lay language.

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| 1. **Applicant Details** | |
| Name |  |
| Contact email address |  |
| CID or Trust Employer ID\* |  |
| Contact phone number |  |
| Career Stage |  |
| Department |  |
| Departmental finance contact |  |

*\* we request CID numbers to collect anonymised, aggregated data periodically to monitor EDI across the BRC.*

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| **2) Proposal Title (max. 20 words)** |
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| **3) Background & Hypothesis (max. 250 words)**  *Describe the rationale for the work; hypothesis; and supporting data* |
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| **4) Lay Summary (max. 250 words)**  *Provide a lay summary* |
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| **5) Proposal Objectives, Plan and Deliverables (max. 750 words)**  *Provide*   1. *Objectives* 2. *Research plan* 3. *Milestones* 4. *How this contributes towards your next stage career plans.* 5. *Details of fellowship applications you have/will be submitting* |
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| **6) Outline how the proposal aligns with the Immunology Theme Core Research Areas (max. 150 words)** |
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| **7) What plans do you have to involve and engage with members of the public as part of this research project proposal?****(max. 300 words)**  *Please see the* [*Public Involvement Resource Hub*](https://www.imperial.ac.uk/patient-experience-research-centre/ppi/ppi-resource-hub/) *for guidance or contact the Imperial Patient Experience Research Centre on* [*publicinvolvement@imperial.ac.uk*](mailto:publicinvolvement@imperial.ac.uk) |
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| **8) Benefit to patients** *how have you identified that this research question is a priority/of benefit for patients/the public) and the NHS* **(max 150 words)** |
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| **9) Resources and Costs**  *Justification for resources requested. Provide WorkTribe for the research costs and append the spreadsheet to this application. Maximum duration is 12months. Animal Costs and equipment are ineligible costs.* |
| Justification:  Amount requested: **£ [INSERT TOTAL AMOUNT REQUESTED]** | |

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| **10) Other Funding Sources**  *List any additional funding sources supporting this work.* |
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| **11) Ethics** | |
| Not required | Please give reason *(e.g. does not involve human material):* |
| Application in progress | Please state status: |
| Ethics (REC) obtained | Please give relevant REC proposaltitle and reference number: |