



INSPIRE Round 5

Sample of online application form

Page 1: School Applying for the Grant

the application, ensuring the correct school is named as the lead organisation:
making a joint application with two or more schools, please state all the schools named in
Please state the school you are applying on behalf of for funding for INSPIRE Round 5. If

School full name and address			

Please state how much your school is applying for. Each school (medical (with or without dental school) and veterinary school) can apply for up to £20,000. If you are a making a joint applicant, each school named in the application can apply for up to £20,000 over two years.

Amount (£)	

Page 2: INSPIRE Lead Contact Details

Please fill out all the details of the INSPIRE lead for your school:

Title	
Full Name	
Position	
Address (Work)	
Contact Number	
Email	







Page 3: INSPIRE Student Lead Details

Please fill out the details for all INSPIRE student leads at your school. At least one student must be named in each application.

Title				
Full Name				
Position				
Address (Work)				
Contact Number				
Email				
Please add more tabl	es where ne	cessary.		

Page 4: Other Significant Individuals

Please fill out the contact details for any other individuals that have had or will have a significant involvement in delivering or advising the INSPIRE programme e.g. administrators, other local academics, industry partners, sciences communication professionals.

Other Individual 1:

Title	
Full Name	
Position	
Address (Work)	
Role within the INSPIRE programme	







Contact Number	
Email	
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Please add more tables where necessary.

Page 5: Activities you Propose to Develop

Outline the activities you propose to develop as part of your INSPIRE programme, including the following:

- Rationale behind each activity.
- Whether it is new or builds on existing activity.
- How the activity meets local needs.
- The number of students you expect to participate.
- An estimate timeline for all activities (in tabular/diagrammatic form)

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(max.	300 words per activity)







Page 6: Background Information to Support Proposal

Use this space to provide background information to support your proposal. Programmes aimed at further developing existing activities or introducing new activities should use this space to provide evidence of their impact. (max. 500 words)
Page 7: Student Involvement
Describe how students will be involved in the development of the local INSPIRE programme. Highlight any existing and proposed association with local/national student groups. (max. 300 words)







Page 8: Collaborative Activity

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Page 10: Activity Sustainability

Describe how you propose to sustain and support INSPIRE activities in the long term through the securing and use of matched funding and 'in-kind' support. (max 300 words)













Page 11: Indication and Justification of Costs

Indicate and justify costs of all activities described in Q5. Please use the table(s) below to provide a breakdown of expenditure for each activity, including additional funding/resources already secured or being sought to support the project whether direct or 'in-kind'.

Act	ivit	y 1:

Activity Elements	Amount (£)	Brief Details
	Total (£)	
Additional Funding	Amount (£)	Brief Details
	Total (£)	
	'In-Kind' Support	Estimated Worth (£)
		Estimated Total (£)

Please add more tables where necessary.







Page 12: Overview of Costs

	Amount (£)	
INSPIRE Funding		
Other Funding		
'In-Kind' Support		
	Grand Total (£)	

Page 13: Additional Information

Page 13: Additional Information
Please use this area to upload any letters of support (e.g. from external organisations providing funding and/or resources 'in-kind' or collaborative partners) and/or any additional information that will help towards a successful application.

Page 14: INSPIRE Lead Declaration

Please read the Application Guidelines and Grant Terms and Conditions for the INSPIRE scheme and the Data Protection statement and Undertakings before signing below.

The personal information that is supplied to the Academy of Medical Sciences (the "Academy") in connection with the application will be stored by or on behalf of the Academy, in accordance with the General Data Protection Regulation and the Data Protection Act 2018. The Academy will be the data controller in respect of your personal information because the Academy dictates the manner in which and the purposes for which your personal information is used. The Academy has the final say as to whether

Wellcome

INSPIRE is coordinated by the Academy of Medical Sciences and supported by the Wellcome Trust. INSPIRE activities are designed and delivered locally by individual schools.





application is successful. The personal information we hold includes the information you complete in the application form and details of correspondence between us.

The personal information we hold includes the information you complete in the application form and details of correspondence between us. We also collect certain special categories of personal information about you including your ethnicity and certain health information. We may use this personal information to extend a Scheme due to a period of sickness absence, or on an aggregated and anonymised basis for equal opportunities purposes which we may share with the Funder (as defined below) and use this information in Academy publications.

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Undertakings	

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- 2. To the best of my knowledge the information provided in this application is accurate and complete.
- 3. I have read the Grant Conditions available on the <u>website</u>, under which grants are awarded and, if a grant offer is made, I agree to abide by them.
- 4. I confirm that the necessary facilities will be made available to deliver this work, and will continue to be available throughout the project.

If you agree to the above statement and undertakings, please tick the box. By checking this box you are signing this form electronically. In doing so you confirm that your electronic signature is the legal equivalent of your manual signature on this form. \square

INSPIRE Lead Full Name	
Date	







Page 15: INSPIRE Student Lead Declaration

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Full Name	
Date	

Instructions to INSPIRE Student Lead: Once the declaration is signed and dated, please press the 'Save & Submit' button. Once you have completed this step, the declaration is complete.







Page 16: Head/Dean of School Declaration

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- 6. The INSPIRE lead will be afforded sufficient time and resources to deliver their INSPIRE activities as proposed in this application.

If you agree to the above statement and undertakings, please tick the box. By checking this box you are signing this form electronically. In doing so you confirm that your electronic signature is the legal equivalent of your manual signature on this form. \Box

Full Name	
Date	

Instructions to Head/Dean of School: Once the declaration is signed and dated, please press the 'Save & Submit' button. Once you have completed this step, the declaration is complete.







Page 17: Co-applicant School 1 Declarations

Important information: This page must only be completed if this is a joint application from two or more schools.

Please fill out the details of the co-applicant school.	
Full Name of Co-applicant School	
Address	

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- 4. I confirm that the necessary facilities will be made available to deliver this work, and will continue to be available throughout the project.

For the attention of the Head/Dean of the co-applicant school:

In addition to undertakings 1-4 above:

- 5. I confirm that the necessary facilities will be made available to deliver this proposal, and will continue to be available throughout the project.
- 6. The INSPIRE lead will be afforded sufficient time and resources to deliver their INSPIRE activities as proposed in this application.







INSPIRE Lead Title and Full Name	
INSPIRE Student Lead Title and Full	
Name	
School Head/Dean Title and Full Name	
Date	

Please use this area to upload a document detailing the acknowledgement and agreement of the Data Protection statement and Undertakings above of the INSPIRE lead, INSPIRE student lead and the Head/Dean of the co-applicant school. Please do so by providing the full name and signature of each person followed by the date.

Instructions to co-applicant INSPIRE lead: Once the necessary signatures have been provided and dated, please press the 'Save & Submit' button. **Once you have completed this step, the declaration is complete.**







Page 18: Co-applicant School 2 Declarations

Important information: This page must only be completed if this is a joint application from two or more schools.

Please fill out the details of the co-applicant school:	
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Address	

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For the attention of the Head/Dean of the co-applicant school:

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Page 19: Co-applicant School 3

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Please fill out the details of the co-applicant school:	
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