****

**BGS Specialist Training Registrar Grant Application Form**

This application form is for the BGS Specialist Training Registrar grant.

Up to two grants of up to £10,000 each may be awarded per round.

The scheme provides grants to enable a Specialist Training Registar to follow through research ideas in short timescales and will provide assistance to innovative research that may be at an early stage. To be eligible for the scheme, the research must relate to geriatric medicine and the healthcare of older people. Applicants must be members of the BGS.

Grant call deadlines are 1May and 30 November annually.

Please complete and attach any further documentation. Before completing the form, please check your research project is eligible for funding and that you have understood what costs can be covered by the grant.

For more information and guidance, visit [www.bgs.org.uk/about/what-we-do/grants-and-prizes](http://www.bgs.org.uk/about/what-we-do/grants-and-prizes).Return the completed form to [j.gough@bgs.org.uk](mailto:j.gough@bgs.org.uk).

|  |  |
| --- | --- |
| **Your details** | |
| **Name** |  |
| **Job title** |  |
| **Place of work** |  |
| **Email address** |  |
| **Contact telephone number** |  |
| **Postal address** |  |
| **Post code** |  |
| **BGS Membership number** |  |
| **Details of your application** | |
| **Project Title** |  |
| **Expected project start and end dates.** |  |
| **Supervisor’s Name** |  |
| **Name of principal investigator and other members of research team** |  |
| **Background to the research including rationale** |  |
| **Outline project details (please continue on separate sheet if necessary)** |  |
| **Does this project require ethical approvals?** |  |
| **If Yes have they been applied for? Please supply documentation of application or outcome.** |  |
| **Has Ethics approval been refused? Please supply evidence of refusal and documentation.** |  |
| **Expected outcome of project (please continue on separate sheet if necessary)** |  |
| **Methodology and Analysis** |  |
| **Power Calculations (if applicable)** |  |
| **Time frame** |  |
| **Any problems anticipated and if so have solutions been planned?** |  |
| **Who will be supporting this research locally?** |  |
| **Please advise of time line after completion of the project (progression of work, completion and dissemniation** |  |

**Cost Breakdown (please be as accurate as you can)**

|  |
| --- |
| **Please give a detailed breakdown of the projects expected costs** |
|  |

**I confirm that if awarded a grant of £2,000 or more, I will submit an ‘End of Grant’ report to the BGS, and I am aware that this is a condition of funding.**

**Signature of applicant and supervisor.**

|  |  |
| --- | --- |
| **Signature** |  |
| **Date** |  |
| **Signature** |  |
| **Date** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Check box list-please list all supporting documents and ensure that all supporting documents are clearly marked (e.g project support, relevant information etc)** | | | |
| **Item 1** |  | **Item 9** |  |
| **Item 2** |  | **Item 10** |  |
| **Item 3** |  |  |  |
| **Item 4** |  |  |  |
| **Item 5** |  |  |  |
| **Item 6** |  |  |  |
| **Item 7** |  |  |  |
| **Item 8** |  |  |  |

**Closing date/deadline:**

Please return your completed form to Joanna Gough at [j.gough@bgs.org.uk](mailto:j.gough@bgs.org.uk) by 1st May or 30th November. If you have any problems or questions please call Joanna at 0207 608 8574.