

1. **Pump-Priming Grants Stage 1 Application Form**

* **Closing date: Monday 7 November 2022 at 5pm.**
* Applicants will be informed of the outcome of this first stage application process mid-November and successful applicants will be invited to submit a more detailed 2nd stage application (closing date Friday 13 January 2023, 5pm).
* Financial details: The grant is worth a maximum of £10,000 and aims to support clinicians/researchers at the early stages of their career(e.g. pre-doctoral).
* The Pump-Priming grants scheme DOES NOT cover: personal salaries and staffing costs, travel or living expenses not related to the research itself (e.g. conference travel), IT equipment which is not directly related to the research project (personal laptops etc) or fees for courses, higher degrees or open-access publication costs.
* Please read the form carefully and ensure that all sections of the form are completed. Applications which exceed the word limits will not be considered. Please complete and submit one copy only to: Ms H Johnstone hjohnsto@rcseng.ac.uk.
* **All eligible applications (FDS RCS England members) will be considered for an FDS Pump-Priming grant. In addition, please indicate (double click) below if you are eligible for, and wish to be considered for, any of the following joint FDS-Specialist Society Pump-Priming grants.**

[ ]  **Association of British Academic Oral and Maxillofacial Surgeons**

[ ]  **British Society of Paediatric Dentistry**

[ ]  **British & Irish Society for Oral Medicine**

[ ]  **British Society of Gerodontology**

[ ]  **British Society of Periodontology and Implant Dentistry**

[ ]  **Society for the Advancement of Anaesthesia in Dentistry**

|  |
| --- |
| **SECTION 1: Your Personal and Contact Details** |
| **Title:**  |  |
| **Forename/s (in full):** |  |
| **Surname:** |  |
| **Home Address:** |  |
| **E-mail:** |  |
| **Telephone No:** |  |
| **Mobile No:** |  |
|  |  |
| **Dental/Medical Specialty** (if applicable)**:** |  |
| **Current Position (grade and employer/service setting):** |  |
| **Please include your FDS RCS Eng membership number**  |  |
| **Please confirm that you do not already have a PhD or equivalent**  | **Confirmed no PhD or equivalent [ ]**  |

|  |
| --- |
| **SECTION 2: Primary Supervisor Details** |
| **Title:** |  |
| **Name:** |  |
| **Address:** |     |
| **Telephone No:** |  |
| **Email:** |  |
| **Signature:** | **Date:** |
| **By signing this form, the supervisor confirms that the Host institution can accommodate the applicant and that the terms and conditions including the financial arrangements can be met. The supervisor is advised to consult with the head of the institution and with the appropriate finance officer** |

|  |
| --- |
| **Section 3: TITLE OF PROJECT** |
|  |
| **Plain English Summary of Research (This should be a brief summary of the proposed research which is aimed at members of the public, rather than researchers or professionals. It should be written clearly and simply and should provide some background to the research, the aim and overall approach planned)****Do not exceed 300 words.** |
|   |

|  |
| --- |
| **SECTION 4: Research Plan (This should include the aim/objectives of the proposed research and details of the design/methods. Also include a brief timeline and indication of the likely costs)****Do not exceed 500 words.** |
|  |

|  |
| --- |
| **SECTION 5: Applicant’s Declarations:** |
| **If I am successful in obtaining this award, I agree to:**1. Acknowledge the support of the Faculty of Dental Surgery of the Royal College of Surgeons of England and include such wordings in all manuscripts.
2. Submit a copy of the accepted paper to the Faculty of Dental Surgery’s Research Committee upon its acceptance in a journal.
3. Contribute to at least one public engagement event for the Faculty of Dental Surgery.
 | **YES** **[ ]  NO [ ]** **YES [ ]  NO [ ]** **YES [ ]  NO [ ]**  |

|  |  |
| --- | --- |
| **APPLICANT’S SIGNATURE:** | **DATE:** |

In line with UK legislation and good practice guidelines, we are asking everyone to complete the Equal Opportunities Questionnaire. You are not obliged to provide any of the information, but if you do so, it will enable us to monitor our business processes and ensure that we provide equality of opportunity to all.