**Faculty of Medicine & Dentistry Pump Priming MDT Fund Application Form (for draft preparations)**

|  |  |  |
| --- | --- | --- |
| 1. **Applicant name** | |  |
| **2. Applicant’s current department** | |  |
| **3. Contact email address** | |  |
| **4. Co-applicants and affiliation** | | |
|  | | |
| **5. Please specify which MDT funding stream you are applying for:** | | |
| Select:   * Environment & Health | | |
| **6. Please outline how your research fits with any of your chosen MDT’s sub-themes (max 50 words)** | | |
|  | | |
| **7. Title of project** | | |
|  | | |
| **8a. Total sum requested** | | £ |
| **9. Case for Support:** | | |
| **i) Executive Summary** (max. 350 words) | | |
|  | | |
| **ii) Justification for what is requested** (max. 200 words) | | |
|  | | |
| **iii) Brief project plan** (e.g., bullet points of timelines, key milestones**)** | | |
|  | | |
| **10. How does your project support MDT theme development and FMDs 2030 Strategy?** (max. 80 words) | | |
|  | | |
| **11. How does this project promote interdisciplinary research?** (max. 80 words) | | |
|  | | |
| **12. Please describe any partnerships with local or regional centres of research excellence, national research infrastructure, or industry.** (max. 80 words) | | |
|  | | |
| **13. Expertise of research team and how this will deliver on the research plan or route to further funding.** (max. 80 words) | | |
|  | | |
| **14. Future funding strategy** Outline your strategy for making the transition from MDT Pump Priming to longer term funding, or other mechanisms of sustainability, including relevant application for funding and other deadlines (max. 100 words) | | |
|  | | |
| **15. Route to translation or impact** What will be your indicators of success and when do you expect each of these to be achieved? (max. 100 words) | | |
|  | | |
| **16. Breakdown of costs (e.g., equipment, other support, etc. Consult Principal Lab Manager/Lab Manager).** | | |
| *No.* | *Item details* | *Amount* |
| *1* |  |  |
| *2* |  |  |
| *3* |  |  |
| *4* |  |  |
| *5* |  |  |
| *Total* |  |  |
| **17. Associated funding received or committed from other sources.** Please provide details including relevant dates. | | |
|  | | |