Education, Research and Innovation Bids - Individual Bid (June 2018)

Individual bid for funding from Education, Research and Innovation Committee

Background Information

All applicants are referred to the ['Standards for Education, Research and Innovation Proposals'](#) when completing this application form.

Completing the Application Form

Although Health Education England will make every effort to liaise and assist applicants throughout the proposal process, no responsibility will be taken for applications that are incomplete, delayed or otherwise not submitted correctly.

All portions of the proposal form should be fully completed; incomplete forms will not be reviewed.

All bids will be assessed by the Review panel that meets twice a year. Closing dates for receipt of applications are 15 June and 15 November each year. Applicants will be informed of the decision by email following the panel meeting and all decisions are final.

Applications will not be accepted into the current round if they are not received by HEE before the deadline.

Further information

Applicants should also note that:

- This form should only be used for bids from individuals applying for themselves to undertake a course. Organisations or groups applying for funding should use an alternative form [available here](#)
- If no indication is given as to alternative sources of funding which have been considered the application will be void

- If the application is not approved by the applicant's employer the application will be void
- There is no lower limit on the amount which can be applied for, which must be indicated in £ sterling, but applications for individuals may not be for more than £6,000 (backfill will not be approved as part of the bid)
- Successful funding awards must be claimed within the financial year in which it is awarded.

By clicking "next" and completing this application form, it is understood that you have read and agreed this guidance.

Saving your application

Please note you can save your application and come back to it at a later date by clicking on the "Finish Later" link at the bottom of the page, and following the required instructions.

Please note that exiting without clicking on this link with NOT save your work.

Individual bid for funding from Education, Research and Innovation Committee

I confirm that I am an individual applying for funding (not on behalf of an organisation or group): ✱ *Required*

○ Yes

○ No

Alternative funding sources

I confirm that I have explored and applied for other funding sources prior to making this application: ✱ *Required*

○ Yes

○ No

Please confirm below other funding sources you have explored and applied for: ✱ *Required*

About the applicant and their proposal

Title: ✳ *Required*

Forename: ✳ *Required*

Surname: ✳ *Required*

Your organisation: ✳ *Required*

Your contact telephone number: ✳ *Required*

Contact email address: ✳ *Required*

For individual proposals for postgraduate funding

Name of course applied for: ✳ *Required*

[   ]

Academic level of programme: ✳ *Required*

- ○ Doctoral Study
- ○ Masters
- ○ PGCE
- ○ PGDip
- ○ PGCert
- ○ BSc / BA
- ○ Graduate Certificate
- ○ Graduate Diploma
- ○ Other
- ○ Not applicable

If you selected Other, please specify:

[   ]

Course fee requested in this financial year (1 April 2018 - 31 March 2019): ✳ *Required*

➕ More info

[   ]

Proposed start date of course / year of study: ✱ *Required*

➕ More info

Dates need to be in the format 'DD/MM/YYYY', for example 27/03/1980.

Please make sure the date is between 01/04/2018 and 31/03/2019.

[   ] 📅

(dd/mm/yyyy)

If the programme of study is over multiple academic years, which year of study are you making an application for?

➕ More info

○ First year
○ Second year
○ Third year
○ Fourth year
○ Other

If you selected Other, please specify:

[   ]

Name of university or educational institution: ✱ *Required*

[   ]

Supporting evidence

Please provide further detail about the impact that undertaking this course will have on you personally: ✳ *Required*

Your answer should be no more than 1200 characters long.

Max 1200 characters (approx 200 words)

Please provide further detail about the impact that you undertaking this course will have on your organisation: ✳ *Required*

Your answer should be no more than 1200 characters long.

Max 1200 characters (approx 200 words)

Please provide further detail about the impact that you undertaking this course will have on the wider NHS:

Your answer should be no more than 1200 characters long.

Max 1200 characters (approx 200 words)

Section H: Approval and Declaration

Please tick the following statements to confirm that as the person making the application to HEE you understand that: ✱ *Required*

> Please select exactly 5 answer(s).
>
> ☐ For higher education course approval, final confirmation of attendance will be required 6 weeks prior to the program commencing
>
> ☐ Only once confirmation has been received, will the place be confirmed with the University
>
> ☐ In the event of subsequent failure to complete the year of study, HEE will be notified by the University
>
> ☐ In the event of failure to complete the year of study, and in the absence of exceptional circumstances, reimbursement of the course fee will be requested from the individual
>
> ☐ In the event of failure to complete the year of study, and in the absence of exceptional circumstances, further applications for the same individual will not be considered for a 5 year period

I can confirm that: ✱ *Required*

> Please select exactly 4 answer(s).
>
> ☐ I have authorisation to apply for this funding to Health Education England (HEE) across Yorkshire and the Humber's Education Research and Innovation Committee
>
> ☐ I am working providing care for NHS patients in Yorkshire and the Humber
>
> ☐ This bid is not for more than £6,000
>
> ☐ I am able to claim any funding awarded in this financial year (1 April 2018 - 31 March 2019)

Your application must be supported by your organisation.

Your application must have the educational support of your organisation, this could be from

your Medical Education Centre via your Director of (Postgraduate) Education or (Medical) Education Manager or via your Learning and Development department via your Head of Learning and Development or the Learning and Development Manager. **Please provide details of the person in your organisation who is most appropriate to provide approval for this bid, and whom you have ALREADY gained support from for this application:**

➕ More info

	✱ *Required*
Full Name of approver:	
Position / role of approver in your organisation:	
Approver's email address:	
Approver's telephone number:	

I confirm that: ✱ *Required*

Please select exactly 3 answer(s).

☐ I have already gained approval from the above named individual to bid for this funding. they have seen this application

☐ I will ensure that I send a copy of my application to them for their information

☐ I am aware that the details of this application may be shared with this individual

Thank you

Thank you for completing this application form. Your application will be sent to the panel for review after the closing date.

We recommend you print a copy of your receipt and **download a copy of your application form now** as evidence of submission as these may be required if there were any queries about your application.

Without this evidence of submission, if your application is not received (e.g. due to a fault in the form) we would not be able to accept your application.

Please see our [website](#) or further details on closing dates and how applications are ranked.