**BNSSG ICB Academic Career Award (ACA)**

**Application Form**

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| **1. Applicant’s Details** | |
| Applicant’s name: |  |
| Job Title: |  |
| Department/Division/Centre: |  |
| Work Address: |  |
| Email: |  |
| Telephone: |  |
| Qualifications held: |  |

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| **2. Previous Funding secured**  *Please add further rows as required* | | | |
| **Funder** | **Amount** | **Year Awarded** | **Your role (CI/Co-App/named researcher)** |
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| **3. Publication record**  *Please list published references, poster/conference presentations and if you would like to, we are interested to see any submitted papers which are not yet in print*. |
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| **4. Outline of proposed area of research**  *Please clearly state why this is important for the BNSSG population*  *The BNSSG Strategy can be found* [*here*](https://bnssghealthiertogether.org.uk/library/ics-strategy/) |
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| **5. How the Academic Career Award will support your development**  *(i.e. what you intend to do if you are awarded funding)* |
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| **6. How your research expertise contributes to the priority areas for your Centre/Department/School** |
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| **7. Your wider contributions to the success of the Centre/Department/School** |
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| **8. Manager Approval** *(confirmation by email is acceptable)* | |
| In my capacity as the line manager of the applicant, I confirm that I support and approve of this application and agree that we can make backfill arrangements where applicable. | |
| **Line Manager’s Name:** |  |
| **Job Title:** |  |
| **Work Address** |  |
| **Email:** |  |
| **Telephone:** |  |
| **Signature:** |  |
| **Date:** |  |