* Please ensure you read the Guidance for Applicants for this call prior to submitting your application. **If you are applying for a small or large project grant, please refer to and apply via the relevant documents.**
* If this proposal has previously been submitted to Sarcoma UK, please attach a maximum of two pages to the front of this application form detailing changes made since the last submission.Please refer to the Guidance for Applicants for full information.
* The deadline for submission is **12pm (BST) on Thursday 28th September 2023.**

**Application Form – PhD Studentships**

**PART ONE – The Applicants: Main Supervisor (PI), 2nd and 3rd Supervisors**

**1. Investigators:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Main Supervisor (PI)** | **2nd Supervisor** | **3rd Supervisor** |
| Title |  |  |  |
| Surname |  |  |  |
| Forename |  |  |  |
| Post held |  |  |  |
| Employing Organisation |  |  |  |
| E-mail Address |  |  |  |
| Telephone number |  |  |  |
| Postal address |  |  |  |
| No’ of PhD students currently supervised |  |  |  |
| No’ of completed PhD’s supervised |  |  |  |
| Hours per week on project (average) |  |  |  |

**2a. Administering organisation:**

Name of Organisation:

Address:

**2b.** Address at which work will be undertaken if different to above:

**PART TWO – The Student**

**3.** Do you have a candidate identified for this PhD?

Y/N

If Yes, please give their name and insert a one-page CV

If No, please say how you will recruit a strong candidate for this studentship

**4.** Does your organsiation have a Doctoral School / Doctoral Training Programme or similar?

Y/N

**4a.** If Yes -Please provide name of Head of Doctoral School (or programme), contact details and website address.

**5.** What core modules and / or training is provided by the Doctoral School?

**6.** Please give the assessment / reporting points for students.

**7.** What is the institutional timeframe form submission of the student’s thesis?

**PART THREE – The Project**

**8. Project Title:**

**9. Planned Start date:**       **Duration (months):**

**10a. Total grant requested: £**

**10b. Total fEC of project: £**

**11. Funding available from the Sarah Burkeman Trust**

*Please refer to the Guidance for Applicants for further details of this opportunity.*

**11a**. Do you wish to also be considered for the funding opportunity from the Sarah Burkeman Trust? **Y/N**

**11b.** If you wish to be considered for this funding, please indicate for which area(s) of interest your application is relevant and justify how your application is within scope for this funding.

**12. Please indicate (if appropriate) the sarcoma subtypes this research focusses on. Please provide details if the project applies to multiple subtypes or if they are not listed below.**

|  |  |  |  |
| --- | --- | --- | --- |
| **All sarcoma subtypes** |  |  | |
| **All or multiple soft tissue sarcoma subtypes** |  | **All or multiple bone sarcoma subtypes** |  |
| Angiosarcoma |  | Mxofibrosarcoma |  |
| Chondrosarcoma |  | Myxoid liposarcoma |  |
| Chordoma |  | Osteosarcoma |  |
| Dermofibrosarcoma protuberans |  | Retroperitoneal Sarcoma |  |
| Endometrial Stromal Sarcoma |  | Rhabdomyosarcoma |  |
| Ewing’s sarcoma |  | Solitary Fibrous Tumour |  |
| Gastrointestinal stromal tumours (GIST) |  | Synovial Sarcoma |  |
| Leiomyosarcoma |  | Undifferentiated Pleiomorphic Sarcoma |  |
| Liposarcoma |  | **OTHER – PLEASE STATE** |  |

**13. Does the research involve people affected by sarcoma to participate directly? Y/N**

*Please note that responses for this question will be reviewed by people affected by sarcoma.*

If yes, please explain the nature of this participation:

**14. Does this project require ethical approval for working with human subjects / samples? Y/N**

If yes, please provide either the NRES / IRAS number if in place, indicate when this is likely to be granted, or your planned submission date:

Any award will not activate until ethical approval is confirmed in writing.

**15. Has this application been assesed / reviewed by:**

**15a.** Your R&D office for any Excess Treatment Costs: **Y/N/NA**

**15b.** The Research Design Service: **Y/N/NA**

If Yes, which RDS?

**15c.** Clinical Trials Unit: **Y/N/NA**

If Yes, which Unit?

**15d.** The National Cancer Research Institute, Sarcoma Clinical Studies Group: **Y/N/NA**

**16.** **Animal work**

Do your proposals include procedures to be carried out on animals in the UK under the Animals (Scientific Procedures) Act? **Y/N**

If yes:

Have the necessary approvals been given by:

1. The Home Office (in relation to personal, project and establishment licences?)
2. Animal Welfare and Ethical Review Body?

Name of Licence holder for project:

Outsourced? **Y/N** To (if known):

Do your proposals involve the use of animals or animal tissue outside the UK? **Y/N**

If your project involves the use of animals, what would be the severity of the procedures? **MILD/MODERATE/SEVERE**

Please provide details of any moderate or severe procedures (no more than 250 words)

Why is animal use necessary; are there any other possible approaches? (no more than 250 words)

Why is the species/model to be used the most appropriate? (no more than 250 words)

Please justify the number of animals to be used per experiment, including details of any sample size calculations and/or statistical advice sought.

**17.** **Other sources of funding**

**i. Has earlier research relevant to this study by you or your team been externally funded?** **Y/N**

If yes, please give details:

Project Title:

Supporting organisation/funder:

Value of award(s) £      Start date and duration of award(s)

**ii. Has this studentship or a similar application being submitted elsewhere? Y/N**

If yes, please indicate to which organisation it has been submitted:

When is a decision anticipated?

**iii. Has this application been submitted elsewhere during the last 12 months? Y/N**

If yes, please indicate to which organisation it was submitted:

What was the result of the application?

**iv. Do you have a partial source of external funding already in place for this project? Y/N**

If yes, please provide details:

**18. Intellectual Property and Exploitation**

Is the proposed research likely to lead to any intellectual property (IP) which may be commercially exploited (for example via a patent)? **Y/N**

If yes, please give brief details of the potential IP:

What is the nature of the mechanism(s) used to determine whether registration is required?

Please give the name and post of the official responsible for registering any intellectual property within the host institution:

**19. External reviewers**

Please suggest up to three individuals who may be suitable to provide expert peer review for this grant. *Please refer to the Guidance for Applicants for guidelines around individuals who would be appropriate to identify. Please note this section will only be viewed and used by Sarcoma UK’s Research Team.*

Name, institution and position:

Email address:

Name, institution and position:

Email address:

Name, institution and position:

Email address:

**20. Key words:**

Please provide a list of up to 5 key words which summarise the proposed project, to assist in finding peer reviewers.

**21. Lay summary of the proposed project:**

*All applications will be reviewed by people affected by sarcoma (lay reviewers), who are not scientific experts. Lay Reviewers will primarily assess proposals on the relevance and importance of the proposed science to people affected by sarcoma. Please see the Guidance for Applicants for more information.*

Please ensure you write in **plain English** and that scientific concepts are explained for a non-expert audience. As a guideline, the summary should cover:

* Background and rationale: why you are doing the study
* What you plan to do
* How you will go about it – experimental plan and intended outcomes
* The potential impact of the study for people affected by sarcoma

A maximum of 300 words should be used.

|  |
| --- |
|  |

**22. Collaborators**

Please give details of collaborators on whom the viability of the project is dependent. Please include a statement (letter/email) of willingness to act as collaborator from each person named with the application in part 6.

|  |  |  |  |
| --- | --- | --- | --- |
| **Collaborator 1** | | | |
| Title |  | | |
| Name |  | | |
| Post |  | | |
| Department |  | | |
| Institution |  | | |
| Address |  | | |
|  | | |
|  | Post code |  |
| Tel |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Collaborator 2** | | | |
| Title |  | | |
| Name |  | | |
| Post |  | | |
| Department |  | | |
| Institution |  | | |
| Address |  | | |
|  | | |
|  | Post code |  |
| Tel |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Collaborator 3** | | | |
| Title |  | | |
| Name |  | | |
| Post |  | | |
| Department |  | | |
| Institution |  | | |
| Address |  | | |
|  | | |
|  | Post code |  |
| Tel |  | Email |  |

*Continue on a separate sheet if necessary*

**23. Declaration and institutional approval**

The application should be approved by the Head of Department and by the Head of the Doctoral School at the institution that will be responsible for administering any grant which may be awarded.

**Main Supervisor / Principal Investigator**

**Signed** Date

**Head of Department**

I confirm that I have read this application and that, if a grant is awarded, the work will be accommodated and administered at our institution. The staff gradings and salaries quoted in the application are correct and are submitted in accordance with the normal practice of this institution.

Name

Post

Institution

Tel       Email

**Signed** Date

**Head of Doctoral School (or equivalent)**

Name

Post

Institution

Tel       Email

**Signed** Date

***We accept electronic signatures on applications by authorised officers.***

**PART FOUR**

**THE PROPOSED RESEARCH STUDY**

Please provide a full description of the proposed study, to a maximum length of 5 pages. Please use a minimum of 10-point size font.

References and power calculations are not counted in this limit. Please ensure that references are provided in full, with all authors listed where appropriate.

* Title of the PhD Project
* Project Hypothesis
* Academic Abstract
* Purpose of the Research
* Background and rationale for the project
* Plan of investigation and methods to be employed
* Pathway to impact for sarcoma patients

*This section will form a fundamental part of our Lay Review assessment process, where applications are reviewed by people affected by sarcoma, who are not scientific experts. Please ensure you write in plain English and that scientific concepts are explained for a non-expert audience.*

* Justification
* Plans for dissemination

References should also be provided in full (this will not be counted in your five-page limit).

**PART FIVE**

**DETAILS OF FINANICAL SUPPORT REQUESTED**

*You can apply for funding for staff, consumables and equipment.* *As a medical charity we fund only the direct costs of research. We do not fund infrastructure costs such as heating, lighting, phones or routine office supplies. If you are intending to receive funding for an aspect of this project from another source please clearly indicate this in part 3, question 17. For a full list of allowed and disallowed costs, please refer to the Guidance for Applicants.*

*Please note that the maximum available PhD studentship cost is £130,000. Applications exceeding these totals will not be accepted. Please ensure you check rates and calculations prior to submission.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Summary of requested support** | Year 1 | Year 2 | Year 3 | Year 4 | Total |
| A. Stipend | £ | £ | £ | £ | £ |
| B. Fees | £ | £ | £ | £ | £ |
| C. Consumables | £ | £ | £ | £ | £ |
| D. Travel and subsistence | £ | £ | £ | £ | £ |
| E.Training, Other and Exceptional items | £ | £ | £ | £ | £ |
| **TOTAL** | £ | £ | £ | £ | £ |

1. **Stipend**

Please provide details of the requested stipend cost. The stipend and fees of the student should be in line with [UK Research & Innovation](https://www.ukri.org/skills/funding-for-research-training/) (UKRI) levels for UK home students, or host institution stipend levels. Please note that UKRI increased their minimum stipend rate in October 2022.

|  |
| --- |
|  |

1. **Please provide additional details of the requested fees**

|  |
| --- |
|  |

1. **Cost of consumables specific to the project.** As a medical charity we fund only the Directly Incurred costs of research. We do not fund Directly Allocated, Infrastructure or Indirect costs.

**Please specify**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item(s)** | **Year 1 cost** | **Year 2 cost** | **Year 3 cost** | **Year 4 cost** | **TOTAL** |
|  | £  £  £  £  £  £  £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £  £  £  £  £  £  £ |
| **TOTALS** | **£** | **£** | **£** | **£** | **£** |

1. **Travel and subsistence.** Conference attendance expenses can be included for dissemination/presentation of project results but not for general educational purposes for the individual.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Destination /Reason for journey** | **No. of journeys** | **Travel** | **Subsistence** | **Other Costs** | **Total** |
| Within UK | | | | | |
|  |  | £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £ | £  £  £  £  £  £  £  £  £  £ |
| Overseas | | | | | |
|  |  | £  £  £  £ | £  £  £  £ | £  £  £  £ | £  £  £  £ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **TOTALS** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **TOTAL** |
| **£** | **£** | **£** | **£** | **£** |

1. **Training / Other / Dissemination / Exceptional items.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Training / Other / Exceptional items** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **TOTAL** |
|  | £  £  £  £  £  £ | £  £  £  £  £  £ | £  £  £  £  £  £ | £  £  £  £  £  £ | £  £  £  £  £  £ |
| **TOTALS** | **£** | **£** | **£** | **£** | **£** |

**PART SIX**

**Curriculum Vitaes**

Please provide a CV, which should include employment history and a list of research publications, for the PI and all co-investigators. This should be a **maximum of two pages** per individual.

Please include any collaborators’ letters associated with the project in this section.

**APPLICATION CHECKLIST**

Resubmission letter, with changes made since the previous submission

(if appropriate). Please refer to the Guidance for Applicants.

Part One – The Applicants

Part Two – The Student

Part Three – The Project

Ethical approval if in place

Part Four – Proposed Research Study (5 pages max)

Part Five – Details of financial support requested

Part Six – PI & Supervisors CV’s & any supporting letters

Please compile into **one** Word document and email to [research@sarcoma.org.uk](mailto:research@sarcoma.org.uk) by **12pm midday (BST) on Thursday 28th September 2023.**