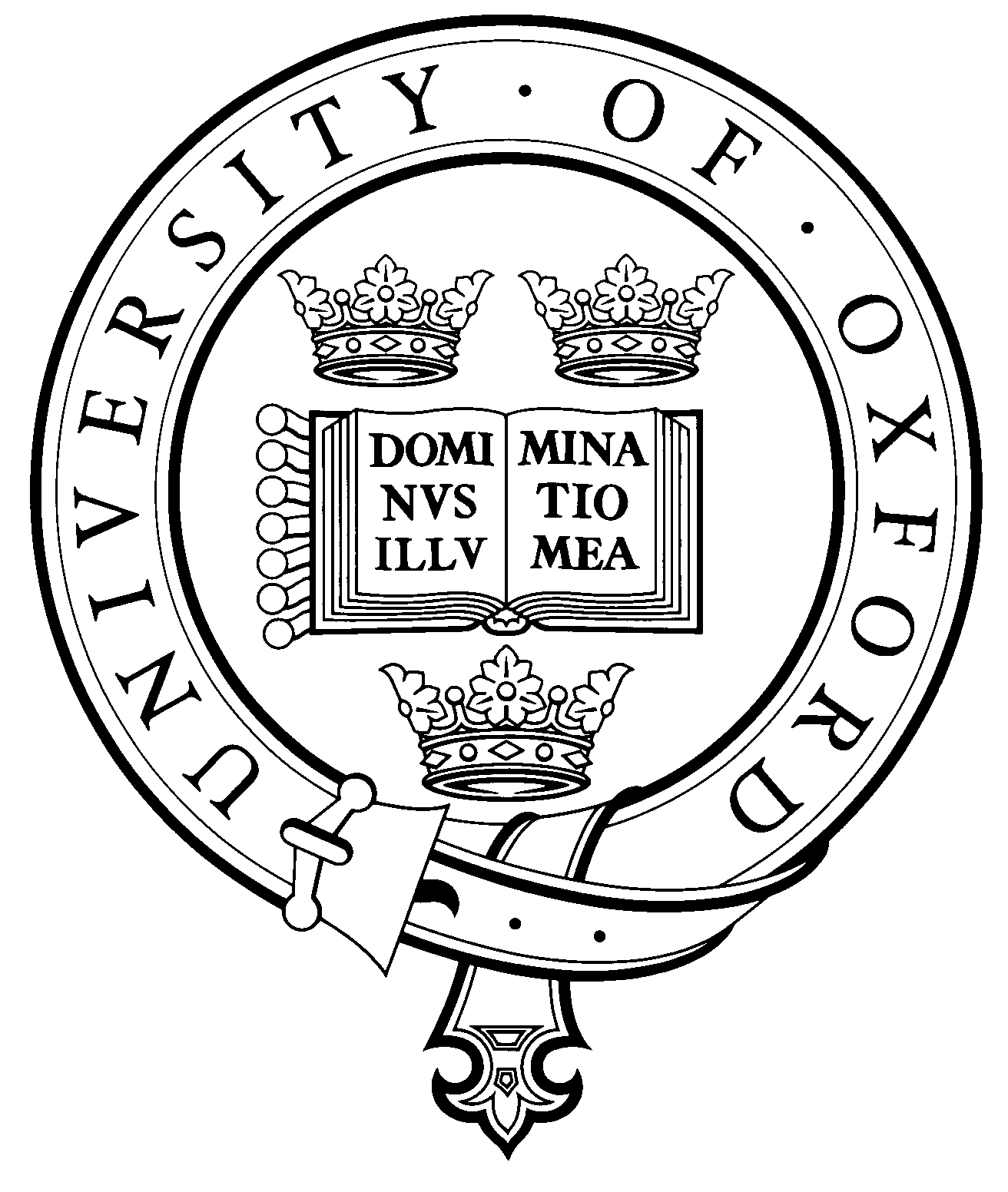
***Bridging Support Scheme***

**APPLICATION FORM**



|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Applicant Information*** | | | | | | | | | | | | |
| **Surname** |  | | | | | **Initials** | |  | | **Title** |  | |
| **Salary Grade** |  | **Grade Point** | | |  | | | **Amount** | |  | | |
| **Department Name** |  | | | | | | | | | | | |
| **Department Address** |  | | | | | | | | | | | |
| **Length of service in academic-related contract research posts** | | | *For Mode 1 at Oxford* | | | | | |  | | | |
| *For Mode 2 in universities or comparable institutions* | | | | | |  | | | |
| ***Information required*** | | | | | | | | | | | | |
| This application is made under *(please tick as appropriate)*: Mode 1 □ Mode 2 □ | | | | | | | | | | | | |
| Period for which funding support is applied: | | | |  | | | | | | | | |
| Please give below a summary of the salary costs requested, making allowance for any annual increment due and including full-on costs (employers’ national insurance and pension): | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Please give below a brief summary of the research to be undertaken during the period for which bridging support is requested (this information may be given as an attachment to this form): | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| ***Information required (continued)*** | | | | | | | | | | | |
| Have you previously applied for bridging or career support? | | | | | | | Yes □ No □ | | | | |
| If yes, please give details: | | | | | | | | | | | |
| Please give below information about the efforts which have been made to secure a new grant, and to arrange the early start of any new award, listing the grant applications made and the date of submission, together with an assessment of the likelihood of success (this information may be given as an attachment to this form): | | | | | | | | | | | |
|  | | | | | | | | | | | |
| ***Declaration from the Head of Department*** | | | | | | | | | | | |
| If a grant is awarded, I confirm that:  (i) the work carried out will be compatible with the other calls on the existing resources of the department;  (ii) any health and safety requirements will be covered; and  (iii) the work will not entail any significant increase in the department’s call on other university services, e.g. the Computing Service (please provide full details if this is not the case).    Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| ***Documentation Required*** | | | | | | | | | | | |
| Please confirm, by ticking the relevant boxes, that the following information is included with your application:  -Statement of support from the Head of Department □  -An up-to-date curriculum vitae, including a list of publications □ (if Mode 2)  -An academic reference from outside the University □ (if Mode 2) | | | | | | | | | | | |