The Royal College of Emergency Medicine

7-9 Bream's Buildings, London EC4A 1DT   Email: theo.chiles@rcem.ac.uk

APPLICATION FOR RESEARCH GRANT

1. Applicant(s) (no limit - photocopy/add further pages if necessary)	Applicant 1 (Lead applicant)	Applicant 2	Applicant 3	Applicant 4
Title and full name				
Position				
Institution				
16 digit ORCID ID (Must supply for Lead applicant; https://orcid.org)	xxxx-xxxx-xxxx-xxxx			
Role on grant (i.e. Supervisor, Statistician, Data collection etc)				
Hours per week on project				

	Applicant 5	Applicant 6	Applicant 7	Applicant 8
Title and full name				
Position				
Institution				
16 digit ORCID ID (Must supply for Lead applicant; https://orcid.org)				
Role on grant (i.e. Supervisor, Statistician, Data collection etc)				
Hours per week on project				

- **If the proposed research involves collaboration with a research network such as TERN, PERUKI, PHOTON, RAFT, TRIC ITERN, Student TERN etc then a letter of support from the organisation must be included**

2. **Institution/Authority (administering grant if approved)**
Addresses at which the work will be done

3. **Project title** (*not* exceeding 116 characters including spaces)

4. **Abstract of research** (*not* exceeding 250 words)

5. **Proposed starting date**.......................

Proposed duration (in months)..........

6. SUMMARY OF SUPPORT REQUESTED	Year 1 £	Year 2 £	Year 3 £	Total £
STAFF				
CONSUMABLES				
SUB-TOTAL				
GRAND TOTAL				

7. **Does the project have Ethical Committee approval?**

Yes ☐

Requested/To be requested ☐

Not required (state why) ☐

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8. **This application must be submitted by/through (i) the Head of Department and (ii) the officer who will be responsible for administering any grant that may be awarded. FAILURE TO COMPLETE THIS SECTION WILL RESULT IN DISQUALIFICATION**

(i) **Head of Department**

Signature   Date

……………………………………………   ……………………………………………………

Title and full name *(block capitals)*   Department

……………………………………………   ……………………………………………………

(ii) **Finance Office of Grantholder**

Signature   Date

……………………………………………   ……………………………………………………

Title and full name *(block capitals)*   Position held

……………………………………………   ……………………………………………………

Address ……………………………………………………………………………………………

………

………

Post Code ………………………………………………………

Telephone number/extension   Fax number

……………………………………………   ……………………………………………………

9. **RCEM Membership category of Applicant 1 (Lead applicant):**

Fellow / Member / Associate Fellow / Associate Member / Affiliate Member / Retired Fellow or Member

10. **Corresponding email address of Applicant 1 (Lead applicant):**

……………………………………………………………

11. PROPOSED INVESTIGATION (Font no smaller than 12 point. Sections 1-17 of Proposed Investigation to take up no more than 4 sides in total i.e. pages 4-7). **PLEASE OBSERVE THE WORD AND PAGE LIMITS ADVISED. APPLICATIONS THAT EXCEED THESE SPECIFICATIONS WILL BE DISQUALIFIED.**

1.	Project title (*not* exceeding 116 characters including spaces)

2.	Project lay summary *(Please complete this section in plain English – avoiding scientific terms wherever possible; not more than 150 words)*

3.   Research question in PICO format:

P: Population:

I: Intervention:

C: Comparator:

O: Primary Outcome:

4.	Background to the study (including a description of the health problem being addressed, what is already known about the topic, the scientific rationale for the study and where this study will contribute to existing knowledge) *(not more than 200 words)*

5.	Results of any pilot studies/previous work/information regarding the efficacy and safety of any proposed intervention if available**.**

6. Patient and Public Involvement

7. Methodology (Not all sub-headings are applicable to all research projects)
a. Study Design (e.g. observational cohort, literature review, qualitative etc):

b. Setting:

c. Population; Inclusion criteira:

d. Exclusion criteria:

e. Proposed interventions:

f. Duration of treatment:

g. Outcome measures: Primary Endpoint:

h. Secondary Endpoints

i. Follow up:

j. Proposed sample size:

k. Power calculation:

l. Proposed statistical analysis:

m. Potential risks and hazards (Justification that the planned recruitment rate is achievable, including the process for identifying potentially eligible participants, the proportion who will fulfil the inclusion/exclusion criteria, estimated consent rates):

8. Expertise available and existing facilities

9. Project timetable (a detailed project time line. Describe how recruitment will be organised and the time period over which it will take place)

10. Detailed justification for support requested

11. Importance of the question to the practice of Emergency Medicine in the UK

12. Other funding secured / applied for

13. Is this a resubmission? If so please briefly describe changes from the original application

14. Value of research to Emergency Medicine

15. Potential academic development of lead applicant

16. Potential opportunities for future funding

17. How will results be disseminated?

18.   Key references (no more than 1 side of A4, p8)

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12. DETAILS OF SUPPORT REQUESTED (summarised in Section 6 of the application form)

DETAILS OF POSTS NAME (if known)	Grade	Start point on scale	Starting Salary £	London Weighting £	Other Allowances £	Combined Superannuation and National Insurance £	Total Costs in Yr 1	Yr2
1.								
2.								
3.								
4.								
5.								

CONSUMABLES ETC Please specify (include animals, equipment, etc)	Year 1 £	Year 2 £	Year 3 £	TOTAL £
The Royal College of Emergency Medicine is a small funder and as such is not able to fund open source publication costs or conference fees.				
SUB TOTAL ANNUAL COSTS £				

13. CURRICULUM VITAE OF LEAD APPLICANT

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Posts held (with dates);please identify tenure and source of funding of present post.

4. Recent publications; also papers in press

(photocopy/add further pages if required)

14. BRIEF CURRICULUM VITAES OF APPLICANTS 2-8; APPLICANT 2

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 3

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 4

1. Surname   Forename(s)   Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 5

1. Surname   Forename(s)   Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 6

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 7

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

APPLICANT 8

1. Surname	Forename(s)	Date of CCT (if post CCT)

2. Degree, etc (subject, class, university, and date)

3. Current posts held (with dates); please identify tenure and source of funding of post(s).

4. Most important publications

(photocopy/add further pages if required)