**Applicant Name**

**Email Address**

**Title of Activity/event:**

**Institute/School**

**FOR PhD STUDENTS ONLY:**

**Primary Supervisor**

**Initial Enrolment Date:**

**Year of Study:** Year 1 Year 2 Year 3 Year 4

**Mode of study:** Full-time Part-time

**Final Submission Date:**

**Main Source of Studentship Funding** (e.g AHRC, ERSC, NERC, MRC, QMUL, Self):

**FOR ALL:**

**Have you previously applied for the Fund?** If yes, state amount awarded (if any):

**No Yes Amount Awarded:**

**Brief Description of Activity/event (150 word max)**

**Total Estimated Costs:**

**Amount sought from DCIF:**

**Statement of proposed activity** (maximum one side A4): please provide a description of the proposed activity/event using the following headings:

* Aims and outline description the of activity/event
* Target audience/participants
* How the activity/event will enrich the research experience, intellectual and/or professional development of postgraduate research students and/or postdoctoral researchers at Queen Mary

**Description/justification of costs**: please describe the costs associated with the activity/event, and complete the costing template below (300 words max)

|  |  |  |  |
| --- | --- | --- | --- |
| *Cost category* | *Total amount* | *Amount from other funders (and source)* | *Amount from DCIF* |
| **Room hire** |  |  |  |
| **Travel** |  |  |  |
| **Catering** |  |  |  |
| **Other (please specify)** |  |  |  |
| **Total** |  |  |  |

**Support from other sources**: please describe your attempts to secure support (in cash or kind) from other sources (e.g. your Institute/School, Learned Societies) and the support provided (if any) (150 words max)

**Statement of support from Institute/School (Head of School/Institute/Director of Graduate Studies).** Please outline how the activity/event will enrich the research experience, intellectual and/or professional development of postgraduate research students and/or postdoctoral researchers at Queen Mary, and provide your opinion as to how innovative the application is (e.g. are such initiatives/events currently available at QML or elsewhere?) (300 words max):

**Signature** (type name if submitting electronically)

**Date**

**Please return this completed form to:**

Your School/Institute administrator, at the deadline set by them (which will be at least a week before the dates given below) who will then collate and forward on to qmpgrf@qmul.ac.uk all the applications from your School/Institute.

**Sign off from Director of School/Institute Director of Graduate Studies/Research**

**Signature** (type name if submitting electronically)

**Date**

SCHOOL ADMINISTRATORS ARE REQUESTED TO ENSURE THEY HAVE OBTAINED SIGN-OFF BEFORE SUBMITTING ALL APPLICATIONS FROM YOUR SCHOOL TO qmpgrf@qmul.ac.uk

**There are three annual deadlines, with the Panel convening to consider applications each term. The final deadlines for the submission of applications from Schools/Institutes are:**

**1 October**

**1 February**

**1 June**