School for Primary Care Research_logo_outlined_CMYK-01 

SPCR Patient and Public Involvement and Public Engagement Grant Application Form

# SECTION A

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| **Project title**: |

*Project Dates:*

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| **Start Date**: |
| **End Date:** |

***Details of Lead Applicant***

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| **Name:** |
| **Email:** |
| **Profile** *(please select from list)***:** Choose an item. |
| **SPCR partner** *(please select from list)*: Choose an item. |

***Details of Co-Applicant*** *(copy box as required)*

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| **Name:** |
| **Email:** |
| **Profile** *(please select from list)***:** Choose an item. |
| **SPCR partner** *(please select from list)***:** Choose an item. |

1. **If one or more of your co-applicants are public contributor(s), please specify their roles within the project**

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1. **If any of the co-applicants is identified as “other”, please specify their role**

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# SECTION B

* 1. **Please summarise your proposed project (max 400 words):**

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* 1. **Please provide a summary of the research your project is linked with or about the proposal you aim to submit. It should include information on the research, who the funder is and timelines of the research project. If your research is still in development, please provide the information available at this point (max 350 words)**

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* 1. **Please describe your current involvement/ engagement plans for this research and how the proposed project will complement and add value (max 400 words):**

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# SECTION C

* + 1. **Please provide a breakdown of the requested budget for your project:**

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* + 1. **Is there any match-funding in place? If so, please provide the information below**

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