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|  | **SMUTS MEMORIAL FUND** |  |

**Application for a Smuts Research Grant (Student)**

Closing dates: 1st January for consideration in Lent Term

1st March for consideration in Easter Term

1st October for consideration in Michaelmas Term.

Please **read the Guidelines carefully** before completing this form.

**PLEASE COMPLETE THIS APPLICATION ELECTRONICALLY. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED**

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| (1) Full name of applicant (surname first)  Male/Female: …………………………………………………………..  …………………………………………………………..  …………………………………………………………..  …………………………………………………………..  Email address: ………………………………………………………….. | |
| (2) Graduate Student (USN) No: | (3) Date of Birth |
| (4) Nationality | (5) College |
| (6) Faculty or Department | (7) Supervisor |
| (8) Details of present University status and degree results (including classes) already obtained. | |
| (9) Graduate Students should state qualification for which they are registered with the Board of  Graduate Studies, the date from which registered, and the title of the research subject as  approved by the Degree Committee. Those not registered as Graduate Students should give  details of their present status  Is this fieldwork part of the research for your Ph.D. ………………………..Y/N | |
| (10) Sources of financial support for present course of study or research  Have you applied for financial support for this Study Visit from your funding body? If not,  why? | |
| (11) **Details of proposed programme of research or fieldwork**, including duration and  intended departure date. Applicants requesting a Research Grant of £500 or more should  submit a detailed programme of research or fieldwork of about 350-500 words **on a**  **separate sheet**) | |
| |  |  |  | | --- | --- | --- | |  |  |  |   Intended departure date DD/MM/YY     |  |  |  | | --- | --- | --- | |  |  |  |   Intended return date DD/MM/YY  Please state country to be visited: | |
| (12) If you will not be returning to Cambridge on completion of the research for which you  require a grant from the Smuts Memorial Fund, please indicate what your plans are: | |
| (13) Previous relevant experience: | |
| (14) **On a separate sheet**, please set out a **detailed budget** for the total amount required for  proposed research or fieldwork, giving details of estimated expenditure broken down into  separate elements.  ***For AVA equipment, please also complete the separate AVA form***  *The Managers ask that you seek good value for money when estimating your expenditure,*  *e.g. choosing Apex or other inexpensive airfares whenever possible. Please therefore give*  *as much information as you can about the costs you expect to incur. If it is essential that*  *you use a more expensive option, please provide a full justification.* | |
| (15) You are required to state your total estimated income for this fieldwork from sources other  than the Smuts Memorial Fund. Please give details of:   1. grants received or promised from College (give source and amount)      1. grants received or promised from other sources (give all sources and amount for each source) 2. applications for support to which no answer has yet been received (specify in each case the award, the amount requested and the date when the outcome is expected) | |
| (16) Total amount still required: | |
| (17) State the amounts you seek from the Smuts Fund and relate them clearly to elements of  your budget under (14) above.    ELEMENTS £     |  | | --- | | **TOTAL SOUGHT FROM SMUTS FUND £** |   **The maximum amount the Smuts Managers will consider is £ 1,000 in this application** | |
| (18) Please give details and dates of any grants previously awarded to you by the Managers of  the Smuts Memorial Fund. | |
| (19) Names and addresses of your referees (Normally to include the Supervisor if the applicant  is a Graduate Student)   1. Supervisor: (b) | |
| (20) Any further information the applicant may wish to submit (Attach a separate sheet if  necessary). | |
| (21) Signature of applicant confirming information provided in this application:  Signature ………………………………… Date: …………………………….. | |
| (22) Signature of Supervisor confirming that the Department supports this application to the  Smuts Managers and that the information given in Section (15) above is correct:  Signature ………………………………… Date: …………………………….. | |

**MANAGERS OF THE SMUTS MEMORIAL FUND**

**Reference A for a Smuts Memorial Research Grant**

For the attention of the Supervisor

1. The applicant named above is applying to the Managers of the Smuts Memorial Fund for financial assistance for fieldwork.

2. The Managers would be most grateful if you could provide them with a reference in connection with this application, a copy of which the applicant has been asked to make available to you. You are asked to provide an assessment of the applicant’s plans for fieldwork and their progress to date in their research. **In order that the Managers make the best use of the limited funding available they would be grateful if you could comment in particular on:**

• The accuracy of the information given in sections 14-17 of the application;

• The applicant’s ability to organise his/her work to best effect;

• Any financial contribution that has been, or may be, made by your Faculty/Department (but

a contribution is not a requirement of funding from the Managers)

3. The applicant has been asked to arrange for a second reference in support of the application.

4. If you are a member of staff of the University of Cambridge, an emailed copy to the Administrator will suffice ([internationalstudents@admin.cam.ac.uk](mailto:internationalstudents@admin.cam.ac.uk))

PLEASE RETURN THIS FORM TO THE ADMINISTRATOR OF THE SMUTS MEMORIAL FUND, INTERNATIONAL STUDENT TEAM, ACADEMIC DIVISION, 17 MILL LANE, CAMBRIDGE, CB2 1RX OR BY EMAIL (internationalstudents@admin.cam.ac.uk).

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Please indicate by ticking the appropriate box whether you agree or do not agree to this reference being released to the person in respect of whom it is written if that person seeks disclosure. If you do not complete this declaration, it will be assumed that you WOULD NOT agree to release your reference if the person concerned seeks disclosure. PLEASE NOTE that there may be circumstances under which the University would be required to make a disclosure irrespective of your wishes but the University would treat your reference in strict confidence insofar as the law permits.

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I do agree to the release of this reference if the person concerned seeks disclosure

I do NOT agree to the release of this reference

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MANAGERS OF THE SMUTS MEMORIAL FUND**

**Reference B for a Smuts Memorial Research Grant**

For the attention of the Supervisor

1. The applicant named above is applying to the Managers of the Smuts Memorial Fund for financial assistance for fieldwork.

2. The Managers would be most grateful if you could provide them with a reference in connection with this application, a copy of which the applicant has been asked to make available to you. You are asked to provide an assessment of the applicant’s plans for fieldwork and their progress to date in their research. **In order that the Managers make the best use of the limited funding available they would be grateful if you could comment in particular on:**

• The accuracy of the information given in sections 14-17 of the application;

• The applicant’s ability to organise his/her work to best effect;

• Any financial contribution that has been, or may be, made by your Faculty/Department (but

a contribution is not a requirement of funding from the Managers)

3. The applicant has been asked to arrange for a second reference in support of the application.

4. If you are a member of staff of the University of Cambridge, an emailed copy to the Administrator will suffice ([internationalstudents@admin.cam.ac.uk](mailto:internationalstudents@admin.cam.ac.uk))

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I do agree to the release of this reference if the person concerned seeks disclosure

I do NOT agree to the release of this reference

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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