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|  |  **SMUTS MEMORIAL FUND** |  |

**Application for Staff/Departments to apply for a Smuts Fund Research Grant**

This form should be returned to the **Administrator of the Smuts Memorial Fund, International Student Team, Academic Division 17 Mill Lane, Cambridge, CB2 1RX or emailed to (****internationalstudents@admin.cam.ac.uk****)**

Closing dates are 1st October, 1 January, and 1 March for consideration in the following term.

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| (1) Full name of applicant (Block letters, Surname first) or department details (if department, please go to section 8) |  |
| (2) Please state whether Dr/Professor | (4) Please state whether male/female |
| (5) College | (6) Faculty or Department |
| (7) Position in Department |
| (8) Address for correspondence |  |
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|  |  |
| Email Address |  |
| **For staff applications please provide the last 4 digits of your bank account number and full payroll number to enable BACS transfer**Last 4 digits of bank account:Payroll number: |
| (8) Details of proposed project, research or fieldwork, including, if applicable, who will be leading it, the duration and intended departure date

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|  Intended departure date DD/MM/YY |  |  |  |  |

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| (9) Total amount required for project, research or fieldwork. Please give details of the separate elements that you have used in calculating this total. |
| (10) Please give your total income for this project, research or fieldwork from sources other than the Smuts Memorial Fund*Please note that the Managers require Senior Members to have applied to the University Travel Fund (see the Special Issue of the Reporter [*[*http://www.admin.cam.ac.uk/reporter/2011-12/special/06/*](http://www.admin.cam.ac.uk/reporter/2011-12/special/06/)*]), their Department, and their College and to any other public sources for which they are eligible.* *If you are not eligible for**awards from the University Travel Fund, please state the*  *reason: …………………………………………………………………………………………..*(a) Grants received or promised from College/Department or University Travel Fund (Please give source and amount)(b) Applications for support to which no answer has yet been received (Please specify in each case the award, the amount requested and the date when the outcome is expected)(c) Total amount still required(d) State the amount of grant you seek from the Smuts Fund and indicate which elements of your budget under (6) you intend to meet with this sum **ELEMENTS £****TOTAL SOUGHT FROM SMUTS FUND £** |
| (11) Please let us know when you last received a grant from the Smuts Memorial Fund and how much this was.(Departments please go to section 13) |
| (12) Please ask your Head of Department or Chairman of Faculty Board (or other appropriate person if you are not Department/Faculty based) to supply a signed and dated supporting statement to the Managers in the space provided below. |
| (13) Signature of applicant confirming the information provided in this application and counter signature of Head of Department/Chairman of Faculty Board or other appropriate person:Signature of applicant: ............................................... Date: ......................................Countersigned by: ....................................................... Date: ......................................Name (please print name): ................................................... Position: ...................................... Signature: ................................................................... Date: .......................................... |

1. If you are seeking insurance costs (both personal and belongings) please visit the following University website for information on how to apply for insurance <http://www.admin.cam.ac.uk/offices/insurance/travel/> At present no charge is made for this cover, the costs being met by the University's insurance budget.