

Manchester University NHS Foundation Trust Post-Doctoral Fellowship Programme 2022

Application Form

Applicant name: <i>Title, Forename, Surname</i>	
ORCID Number, if you have one:	
Address for correspondence:	
E-mail address:	
Telephone Number (s)	
Current Job Title:	
Band/Grade:	
Work address (if different from above)	
What service and department do you work in?	
Please provide a brief summary of your role (200 words maximum) Where possible, please indicate how your post is divided between clinical or practitioner duties, administrative and managerial, teaching and research duties (as relevant):	

Applicant's CV

Please ensure that you have provided details of your current registration to enable confirmation of eligibility

Professional Bodies	
Membership Reference	Institution

Professional and Higher Education Qualifications				
Qualification obtained	Institution <i>(name, city, country)</i>	Date commenced	Major field of study	Year completed

Publications (if relevant) indicate whether published, in press, under review or in preparation presented in order: authors, article title, publication name, publication year, volume and pages

Conference presentations and posters (if relevant) include name of presentation/poster, conference title and date

Prizes, awards or other relevant esteem indicators:

Date	Title	Awarding Body

Research Grants: (only include grants for which you are a lead or co-applicant)

Title of grant and awarding body	Role in Research Grant	Total value £	Start date	End date

Please describe your research experience to date (max 500 words)

2. Details of proposed research

Please give an outline of your proposed post doctoral application (max 1000 words)

Please identify NIHR or relevant funding body to be considered for Post-Doctoral application and submission date. (100-200 words)

Please outline how your Post-Doctoral application aligns to Trust priorities for nursing/midwifery/allied health professionals. (150-200 words)

Please outline the anticipated benefits of the study to patients/service users and to your current and future practice. (e.g. *improvements in direct care or how findings will indirectly improve care.* 150-200 words)

Please outline where you propose to submit your doctoral fellowship application and the deadline date (NIHR or similar doctoral fellowship opportunity with submission dates)
(max 150 – 200 words)

Please describe your publication plans during the Post-Doctoral Clinical Academic Bridging Fellowship. (*Minimum of two articles. 150 – 200 words*)

Please state any other relevant information. (*e.g. this is part of a larger research project. 100 to 200 words*)

Please provide details of any other funding for which you have applied

3. Supervision

Please outline contribution to Masters and/or PhD supervision of Masters/PhD students. Applicants are encouraged to discuss this with their Lead Research Champion and Professor Michelle Briggs (100 words)

4. Training and Support

What training and support will you need in preparation of your application for a competitive, post-doctoral award?

Please ensure you that where these will incur a fee that you provide the itemised cost of this below.

5. Costings

MFT will pay for backfill at up to 50% of the FTE salary costs for up to 12 months

Please outline percentage of backfill required, with justification (100 – 150 words). This section must be completed with either Joanna.bryant@mft.nhs.uk, NIHR Grants Research Assistant or your [Hospital Research and Innovation Manager](#) and your departmental finance lead.

Please ensure this includes any salary increments you are due during the award period.

FTE salary from start to end of fellowship (maximum 50% FTE - please state dates)	Total salary cost
Please add up the costs for all training/development that will incur a fee that you have outlined above and provide a total cost for this below	
Justification	
Total Fellowship cost	

We will need to liaise with the finance person in your department to organise the payments for your salary cost. Please enter the details of the relevant person in your finance department below and ask them to sign off on the costings they have provided below.

6. Finance Approval

I confirm that the applicant has discussed this application with me and the costings I have provided in this application form are accurate.	
Name	
Organisation	
Job title	
Email	
Signature	

7. Agreement from Managers

Your Head of Nursing/Midwifery or AHP Head of Service must sign this form to approve of your application and the secondment arrangements. Additionally, your immediate line manager must provide a separate letter of support* to be submitted with this application form.

Line Manager letter of support:

The letter acts as a character reference, attesting to the suitability of the applicant undertaking the Post-Doctoral Clinical Academic Fellowship and provides agreement to support your release from clinical practice. Please provide line managers' name, position, work address including contact telephone and email on the letter of support and sign the letter

Head of Nursing/Midwifery or AHP Service Approval:

Provides proof of place of work, acknowledge their support and confirm they understand what it entails including agreement to support your release from clinical practice.

Applicant Name:	
I can confirm that the applicant has discussed this application with me and I am in support of their application and arrangements are in place to release them for the %FTE detailed within the costings section above so they can undertake this award.	
Head of Nursing/Midwifery or AHP Head of Service Signature:	Date:
Head of Nursing/Midwifery or AHP Head of Service Name:	Position:
Address:	
Post code:	
Telephone number:	Email:

8. Commitment

The Post-Doctoral Fellowship requires the following expectations from successful candidates:

- The application should be used as the basis for a future Post-Doctoral application for funding to NIHR or relevant external funding agency, linked to Trust priorities.
- To publish in peer reviewed academic journals
- To submit poster/oral presentations to the NMAHP Research Conference and or National/International Conferences.
- Contribute to Masters and or PhD supervision.
- All papers or publications must acknowledge the Trust and Manchester Academic Health Science Centre.
- Annual academic progress reports and final report to be completed.

9. Declaration and signature by applicant:

I confirm that the details and information given on this application form are correct and accurate and no information requested, or other material information has been omitted.

Signed by applicant:

Date:

Completed applications to be submitted to joanna.clark@manchester.ac.uk before 5pm on the **23rd May 2022**. Relevant costings and all signatures (or letters of support) must be submitted along with your application form.