**APCP Research Bursary Application Form**

All applicants are requested to complete the table below. Please note that applications are anonymised prior to review and selection by the APCP professional development group (PDG).

To maximise a successful application please provide as much relevant information as possible.

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| **Applicant Details** |
| **Please tick which bursary amount you are applying for.** **The following amounts are available, however please specify the exact amount you are requesting funding for.**  | Research | Request |
| Group AUp to £500  |  |
| Group B£2000 |  |
| **APCP number** |  |
| CSP number (if applicable) |  |
| First name:  |  |
| Last name:  |  |
| Title:  |  |
| Current post: |  |
| Organisation:  |  |
| Contact Address:  |  |
| Email: |  |
| Contact Phone number |  |
| Qualifications Dates & institutions |  |
| **Background/ rationale for the research** (200 word max) |
|  |
| **Please state your research question/s or aims and the research objectives** (150 words max) |
|  |
| **Provide details of the following** (150 word max)Research Design:Data collection and proposed data analysis methods:Ethical considerations / exempt (include timeline): |
|  |
| **Funding requested with break down of expenses** (in £)**:** (100 words max) e.g equipment, travel, stats support |
|  |
| **Dissemination plans and statement relating to the impact in relation to APCP aims and/ or CSP research priorities** (150 words) |