**MPS Society
Scientific Research Grant Application**

PLEASE COMPLETE AND RETURN VIA EMAIL TO csac@rd-rp.com

1. **Summary Information**

**Title of Project:**

Click or tap here to enter text.

**Principal Investigator Name:**

Click or tap here to enter text.

**Affiliation:**

Click or tap here to enter text.

**Date of Application:**

Click or tap here to enter text.

**Estimated cost:**

Click or tap here to enter text.

**Estimated duration (please provide dates):**

Click or tap here to enter text.

**Contact Email:**

Click or tap here to enter text.

**Contact Telephone:**

Click or tap here to enter text.

1. **Lay Summary**

Please provide a brief, non-technical summary of the project:

Click or tap here to enter text.

1. **Collaborators**

Please list any collaborators involved in the project, including their names and affiliations.

Click or tap here to enter text.

1. **Abstract**

Please provide a concise summary of the clinical or scientific aspects of the project.

Click or tap here to enter text.

1. **Background**

Please offer a brief overview of the background and context of the research. Include key references if applicable. Please highlight how your proposed research adds to the existing body of knowledge.

Click or tap here to enter text.

1. **Objectives/Aims**

List the specific objectives and aims of the research project.

Click or tap here to enter text.

1. **Plan of Investigation**

Outline the detailed plan and methodology for conducting the research.

Click or tap here to enter text.

1. **Relevance and Impact on Community and Patients**

Explain how the research is relevant and beneficial to the community and the potential impact on patients. Please try to address the following points:

* The importance or burden of the health or care problem being studied
* The improvements in health and care this research is likely to lead to
* The potential impact of the research on patients, the public and people working in health and care

Click or tap here to enter text.

1. **Detailed Costs**

Break down the costs associated with the project, specifying how the grant funds will be allocated. Please feel free to provide this as a separate supporting document if necessary.

Click or tap here to enter text.

1. **Governance**

Detail any governance measures in place, such as ethical committee approvals or other relevant approvals.

Click or tap here to enter text.

1. **Supporting documents**

Please also include the following supporting documents with your application:

* Curriculum Vitae of the applicant(s)
* Human Subjects Compliance Agreement (please see below)
* Animal Subjects Compliance Agreement (please see below)

**By submitting this application, the Principal Investigator acknowledges compliance with all relevant ethical guidelines and commits to providing regular progress reports if the grant is awarded.**

**Signature:** Click or tap here to enter text.

**Date:** Click or tap here to enter text.

**Submission Deadline: 14th April 2025**

## Human Subjects

## Compliance with Government Requirement

The following statement must be signed by an individual authorised to act for the research institution and to assume on behalf of the institution the obligations imposed by the following:

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (institution)

agrees that if a research grant is awarded by the MPS Society to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (applicant or lead investigator)

for the project

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 (project title)

and if human subjects are used in any of the activities supported by such an award, that it will comply with all applicable UK regulations with respect to the rights and welfare of such subjects.

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (institution)

agrees to indemnify and hold The MPS Society harmless from any claims arising from such activities and acknowledges that The MPS Society does not and will not assume responsibility for the subjects involved.

Approval by the Head of Research Institution on Behalf of the Institution.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

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Name printed or typed

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Title

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Date

## Animal Subjects

## Compliance with Government Requirement

The following statement must be signed by an individual authorised to act for the research institution and to assume on behalf of the institution the obligations imposed by the following:

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agrees that if a research grant is awarded by the MPS Society to

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(applicant or lead investigator)

for the project

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 (project title)

and if animal subjects are used in any of the activities supported by such an award, that it will comply with all applicable UK regulations and shall comply with the MPS Society’s ‘Use of Animals in Research’ policy and Association of Medical Research Charities guidelines for care and use of laboratory animals with respect to the rights and welfare of such subjects.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (institution)

agrees to indemnify and hold The MPS Society harmless from any claims arising from such activities and acknowledges that The MPS Society does not and will not assume responsibility for the subjects involved.

Approval by the Head of Research Institution on Behalf of the Institution.

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Signature

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Title

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Date