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**Foundation for Liver Research**

**Legacy Grants Scheme**

**Application Instructions** (delete prior to submission)

Prior to completing your application, please refer to the Legacy Grants Scheme Overview and Terms and Conditions of Award which can be downloaded [from our website](https://www.liver-research.org.uk/news/liver-research-courses/legacy-grants-scheme.html).

Applicants must complete this application form and provide a short 2-page CV per named applicant/co-applicant plus an optional list of relevant and recent publications (maximum one page of A4).

To help us monitor diversity of applicants to this scheme, we also request that applicants complete a very short, anonymous [Equality, Diversity and Inclusion survey for applicants.](https://forms.office.com/e/WZSKwnXD3n)

Suggested word counts are provided within the form sections as guidance only. There is an overall limit of 12 A4 pages for the completed application form. Any additional pages will not be reviewed. Please note that we expect all applications to be submitted in Arial or Calibri font, with a minimum font size of 11, and we kindly request that there be no alterations to margins or layout.

***Please name your application documents according to the following naming protocol***:

* <Surname of lead applicant, initial, LGS 2024 application form>
* <Surname of lead applicant, initial, CV>
* <Surname of lead applicant, initial, Co-applicant CV, name of co-applicant> (where applicable)
* <Surname of lead applicant, initial, Publications> (max 1 page)

**The completed application documents should be emailed in pdf format to** [**grants@researchinliver.org.uk**](mailto:grants@researchinliver.org.uk) **by 5pm, Friday 12th April 2024**

*The above instructions section should be deleted prior to submission of this form.*

**Application Form 2024**

|  |  |
| --- | --- |
| **Applicant details** | |
| **Details of primary applicant** | |
| Title |  |
| Full name |  |
| Position |  |
| Department and institution |  |
| Address |  |
| Telephone |  |
| Email |  |
| ORCID or link to Scopus author page | *(optional)* |
| Twitter handle | *(optional)* |
| **Details of any co-applicants (if applicable)** | |
| Title |  |
| Full name |  |
| Position |  |
| Department and institution |  |
| Address |  |
| Telephone |  |
| Email |  |
| ORCID or link to Scopus author page | *(optional)* |
| Twitter handle | *(optional)* |

*(add lines for additional co-applicants as necessary)*

|  |  |
| --- | --- |
| **Host Institution details** | |
| Host institution legal name |  |
| Administrative contact person’s name |  |
| Administrative Contact email address |  |

|  |  |  |
| --- | --- | --- |
| **Project details** | | |
| **Title of project** | | |
| **Proposed start date** *(1st of month between 1st July 2024 and 1st January 2025)* | | |
| **Duration** *(12-24 months)* | | |
| **Lay Summary** *(250-500 words)* | | |
| **Background and rationale** *(200-300 words)* | | |
| **Research aims** *(100-200 words)* | | |
| **Preliminary data supporting the application** *(250-500 words)* | | |
| **Experimental plan** *(500-750 words)* | | |
| **Methods & Ethics** *(400- 500 words: please include existing ethics approval where applicable)* | | |
| **Timelines/Milestones of the project during the lifetime of the grant** | | |
| **Intended outputs and impact** *(500-750 words: to include scientific outputs, clinical impact, potential for the proposed research to inform further studies)* | | |
| **Applicant’s capability to deliver** *(100-200 words* *including short description of research environment)* | | |
| **Budget details** | | |
| **Budget breakdown table** (*note that the Foundation does not fund indirect costs or overheads)* | | |
| ***Cost type*** | ***Short Description of costs*** | ***Figures in £*** |
| *Staff costs* |  |  |
|  |  |
| *Staff costs sub-total* | |  |
| *Consumables (please provide a clear breakdown)* |  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| *Consumables sub-total* | |  |
| *Small Equipment (max. £3000)* |  |  |
| *Other (insert additional rows below)* |  |  |
| *Requested budget total* | |  |
| **Is this same project supported by other grant income or other financial streams?**  **No**    **Yes** (if yes, please detail grant giving body and amount below) | | |
| **Was this application previously submitted to the Foundation for Liver Research for funding?**  **No**    **Yes** | | |

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