

2024 Flexible Mobility Award Placements

Record ID _____

Application Checklist:

Please ensure the following supporting evidence is also included with your application:

- 1. Lead applicant's 1-2 Page CV submitted
- 2. Letter of support from the applicant's Organisation
- 3. Letter from the Placement Organisation stating their support for the application
- 5. Project Financial Breakdown Overview (template download below)

Please note you may save your application at any stage and will be issued with a return code and emailed a link for your saved application. Please ensure you make a note of your return code. This will not be included in the email.

You will need the link and return code to resume and complete your application. The link and return code can also be shared with other parties involved in the application, where they are required to submit/complete information.

[Attachment: "INFORM Hub Funding Call FMA Placement Financial Breakdown Template.xlsx"]

APPLICANT DETAILS

Applicant Name:

Career Stage:

- Early Career Researchers < 5yrs Post-Doc
- Early Career Professionals < 5 yrs in Industry
- Technicians
- >5yrs Post-Doc
- Other

Employers Name and Address:

Job title:

Email:

Telephone:

Please confirm you are a member of INFORM:

- Yes
 - No
- (In order to receive funding all applicants must be registered to INFORM. Please sign up for your free INFORM membership via the Website.)

PLACEMENT PARTNER DETAILS:

Organisation Name and Address:

Placement Contact Name:

Job Title:

Does the placement partner organisation have a nutrition/wellness strategy?

- Yes
- No

Email:

Telephone:

Please confirm you are a member of INFORM:

- Yes
- No

(In order to receive funding all applicants must be registered to INFORM. Please sign up for your free INFORM membership via the Website.)

PLACEMENT DETAILS:

Is this placement proposal the result of a new collaboration? Yes No

Proposed placement start date: _____

Proposed Placement end date: _____

Briefly outline the placement details (max 200 words)

(Role undertaken, areas placement will be working in, etc.)

Outline the expected outcomes of this placement (max 200 words)

(Details of skills/knowledge, areas of personal/professional development)

Outline the impact this placement will have on the applicant (max 200 words)

Outline the value of this placement to the collaborating partner (max 200 words)

(Include the key benefits the project will bring to the industrial partner and an indication of the commercial potential for this project)

Provide a brief outline of how this placement will support the objectives of the INFORM Hub (max 200 words)

(Include how the project will lead to a longer term relationship with the partner and how the project fits in with their overall R&D strategy)

PLACEMENT FINANCE: Please provide a summary breakdown of the placement costs under each funding heading below. Costs should be entered as 100% FEC.

The following costs are not eligible for funding:

indirect or estate costs at the research organisation

any costs relating to intellectual property protection, including but not limited to registering, maintaining, or supporting patents or property rights

equipment with a value of £10,000 or more

Undergraduate or Postgraduate activities, training, or core PhD training, including tuition or bench fees.

Directly Incurred Costs:

Placement duration

_____ (maximum 6 months)

Applicant Salary 100% FEC for placement duration:

_____ (Maximum of 6 months)

Travel and Subsistence 100% FEC:

Host Organisation DI Costs 100% FEC:

_____ (consumables & other DI expenditure)

Total amount requested from INFORM:

_____ (Auto-calculated field)

Cash contribution to project from placement partner (if any):

Provide details of in-kind contribution (if any) from placement partner (max 200 words)

_____ (e.g. materials supplied, staff time, equipment time.)

DECLARATION:

Applicant Signature:

Applicant signature date:

Placement Organisation Contact Signature:

Placement Organisation Contact Signature Date:

Support from Applicant's Head of Department/Finance Officer:

I confirm that the organisation will undertake to administer the placement funding. I understand that the funding will be paid in arrears on the provision of a placement completion form and a statement of expenditure. Receipts will not be required but the organisation will keep proper financial records should an audit be required.

Head of Department/Finance Officer Signature:

Head of Department/Finance Officer Name and Role:

Head of Department/Finance Officer Signature Date:

Supporting Evidence:

Lead applicant's 1-2 page CV:

(please submit PDF or Word file)

Letter of support from the applicant's organisation:

(please submit pdf or Word file.)

Letter from placement organisation stating their support for this application:

(please submit pdf or Word file.)

Detailed breakdown of financial costing for application

(Please submit completed template provided)