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| **Macintosh HD:Users:charlesheard:Desktop:OutlookEmoji-1506607135702_CITER07d3e222-3ede-493a-a048-5dd09255a455.jpg** | **Cardiff Institute of Tissue Engineering and Repair**    **Research Travel Bursary**  Application for Funding |

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| Please refer to the CITER Research Bursary Terms and Conditions before completing this form.  Applications should be submitted by email to [citer@cardiff.ac.uk](mailto:citer@cardiff.ac.uk) with the title: Research Travel Bursary Application.  **Applications must be received no later than 5pm on 1st February 2018** | | | | | | | | | | |
| **Project Title** | | |  | | | | | | | |
| Applicant | | | | | | | | | | |
| Title |  | | | Forename |  | | Surname |  | | |
| School |  | | | CITER member since |  | | Email |  | | |
| Project Details | | | | | | | | | | |
| Start Date of travel | |  | | | |  | Return Date | |  |  |
| Total payable up to £2,000 (money will be paid in arrears following production of receipts and in line with Cardiff University rules and regulations regarding such expenditure). Bursaries must be claimed within 11 months of a successful award. | | | | | | | | |  | |
| Has an application been made to another funding body? Please specify deadline for this decision. | | | | | | | | | | |
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| If you will be applying to another funding body, which one will it be and when will you be informed of the decision? | | | | | | | | | | |
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| Have you been awarded this CITER funding in the past? If so, briefly describe the outcomes. | | | | | | | | | | |
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| Please give details of prior engagement with CITER activities (eg outreach, workshops) | | | | | | | | | | |

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| Please provide a brief summary of the project giving:   * Name and address of the host and research laboratory to be visited * Brief description of the work to be undertaken and state why this research cannot be carried out within a Cardiff University laboratory (max 150 words) * Links to staff/School/Centre/CITER activity as appropriate * Details of anticipated outputs/future grants arising from this visit (Max 100 words) | | | |
|  | | | |
| Applicant | | | |
| Name/  Signature |  | Date |  |
| Head of School/Director of Centre | | | |
| Name/  Signature |  | Date |  |