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**MRC Skills Development Fellowship in Health Economics**

**Stage 2 Application Form**

[Please append a copy of your Academic Curriculum Vitae to this application form, in MRC format ([Template](https://www.mrc.ac.uk/documents/doc/fellowship-cv-template/)]

Please complete the application in font Arial, size 11.

**1. APPLICANT DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Surname** |  |  | | | | |
|  |  |  |  |  |  |  |
| **Forename** |  |  | | | | |
|  |  |  | | | | |
| **Email Address** |  |  | | | | |

**(a)**

**2. Project Details**

**a. Objectives**

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| **List the main objectives of the proposed research in order of priority**  Max 4000 characters (including spaces and returns) |
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**2b. Project Summary**

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| **Describe the research in simple terms in a way that could be publicised to a general audience.**  Max 4000 characters (including spaces and returns) |
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**2c. Technical Summary**

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| **Describe the proposed research in a manner suitable for a specialist reader.**  Max 2000 characters (including spaces and returns) |
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**3. Training Plan (max 1 side A4)**

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| --- |
| ***Project Title:*** |
| **Advisor/supervisory team:** |
| **Scientific background and objectives:** |
| **Training Details** |
| **General:** |
| **Phase 1 (Months A-B)** |
| **Phase 2a (Months C-D)** |
| **Phase 3 (Months E-F)** |
| **Phase 4 (Months G-H) (delete / add phases as appropriate)** |

**4. Career Intentions**

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| Indicate the reasons for applying for the fellowship, and outline your short and long-term research and career intentions.  Max 1 side A4 |
|  |

**5. Impact Statement**

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| The impact summary should address two questions:   * Who will benefit from this research? * How will they benefit from this research?   (Max 2 sides A4) |
|  |

**6. Justification of resources (please attach separate document)**

All items requested in the proposal need to be justified in the JoR. The JoR is a mandatory attachment and may be **no more than two sides of A4 in 11 point Arial typeface.**

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**7. Approvals and signatures**

I confirm that I am aware of the content of this application, and that the information given above is, to the best of my knowledge, correct.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of candidate:** |  | **Date:** |  |
| **Name of Candidate (please print)** |  |
|  |  |  |  |
| **Signature of proposed sponsor / supervisor** |  | **Date:** |  |
| **Name of proposed sponsor / supervisor (please print)** |  |
|  |  |  |  |
| **Signature of Head of School / Division** |  | **Date:** |  |
| **Name of Head of School / Division** |  |