**![Logo, company name

Description automatically generated]()Adult Social Care Practitioner Researcher Internship Awards**

**Application Form**

Please make sure you have completed all sections of the form before you submit it. We will not chase up incomplete forms.

Forms submitted after the closing deadline of **5pm 1st April 2022** will not be considered so please give yourself enough time to have the relevant discussions and to complete the form.

It is fine to include electronic signatures.

**SECTION 1. To be completed by the applicant**

|  |  |
| --- | --- |
| **Personal Details** | |
| Title |  |
| Forename |  |
| Surname |  |
| Name of Employer |  |
| What is your profession? |  |
| Job Title |  |
| Current salary grade |  |
| Address for correspondence |  |
| Postcode |  |
| Contact email |  |
| Contact phone number |  |
| Professional registration: Please provide details of the status of your professional registration with Social Work England and HSPC where appropriate | |
| Please describe briefly your current role (max 200 words) | |

|  |  |  |
| --- | --- | --- |
| **Education and Qualifications** | | |
| Please provide details of your qualifications obtained since leaving school with the most recent first. (add additional rows if required) | | |
| Name of institution | Dates of attendance | Qualification obtained (include class or grade if known) |
|  | From |  |
| To |
|  | From |  |
| To |
|  | From |  |
| To |
|  | From |  |
| To |

|  |
| --- |
| Please state any support required as a consequence of any disability or medical condition |
|  |

|  |
| --- |
| **Application Questions** (please complete all of the following questions with a **maximum 250 words per question**.) |
| 1. What research experience and training do you have and where did you acquire these? |
| 2. Why do you want to undertake an internship? |
| 3. What are you hoping to achieve as a result of undertaking the internship? |
| 4. What are your future career plans and how will the internship help you to realise them? |
| 5. How do you think your internship will enhance your practice? |
| 6. What is your proposed research project? If you do not have a specific project in mind, please explain your area of research interest. |

**SECTION 2. To be completed in conjunction with your proposed supervisor**

If you currently have no supervision arrangements in place and would like

NHS R&D NW to help identify a suitable supervisor please tick here

|  |  |
| --- | --- |
| **Supervisor’s contact information** | |
| Title |  |
| First name |  |
| Surname |  |
| Host university: Faculty/Centre/School |  |
| Address for correspondence |  |
| Contact email |  |
| Contact phone number |  |
| Please briefly outline your experience of supervising research degree students (max 250 words) | |
| Please describe broadly the research activity you will expect the intern to follow, including the experience and skills to be developed. | |
| **Declaration from supervisor** | |
| I confirm that I have met with (insert applicant’s name) and that we have agreed the above programme of work for the duration of the internship | |
| Signature | Date |

**SECTION 3. Supporting statement from employer**

|  |
| --- |
| **Employing organisation supporting statement** |
| Applicant’s name: |
| This section is to be completed by the applicant’s line manager, and also signed off by your PSW, confirming support for the proposed internship.  Please note that this should confirm that the intern will be released from professional responsibilities for the duration of the programme, including all the residential workshops.  It should also confirm agreement for the employer to undertake both an initial personal development planning meeting with the intern and a final review of the internship experience. |
| Signature of line manager Date |
| Signature of PSW Date |

**SECTION 4. Declaration from applicant.**

|  |  |
| --- | --- |
| I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted | |
| Signature | Date |

**The deadline for submission is Friday 1st April 2022.**

Please return your completed forms to [joanne.simpson@researchnorthwest.nhs.uk](mailto:joanne.simpson@researchnorthwest.nhs.uk)

**What happens next?**

Following the submission deadline, all applications will be checked for completeness and eligibility and eligible applications will be sent to the selection panel for consideration at the Funding Recommendation Meeting.

* Deadline for applications **Friday 1st April 2022**
* Interviews will be held on **Tuesday 12th April 2022** (these will be face 2 face OR online)
* Date of first 2-day residential **18th & 19th May 2022** at Lancaster House Hotel, Lancaster

Applicants will be notified of the outcome of their application via email. It can take up to 10 working days for application outcomes to be issued. Feedback can be made available to unsuccessful applicants on request.