|  |  |
| --- | --- |
| Applicant name and affiliation: |  |
| Institution proposed to visit: |  |
| Proposed start date:  *(March 2020 onwards)* |  |
| Duration of visit (days): |  |
| Total amount requested (£ or $): |  |

**International Alliance for Cancer Early Detection (ACED)**

**Skills Exchange and Development Travel Award Application**

1. **Application Summary**
   1. **Collaborative team**

**Provide details of the research team you wish to visit as part of the skills exchange and development opportunity in the table below; please add more rows if necessary.**

|  |  |  |
| --- | --- | --- |
| **Name** | **Affiliation** | **Research area** |
|  |  |  |
|  |  |  |

1. **Information on Applicant**

Provide details of the applicant for this award in the table below; please add more rows if necessary.

|  |  |
| --- | --- |
| Current position: |  |
| Is your current position funded for the duration of the applied award? |  |
| What is the source of your current funding? |  |
| Are you a clinician? |  |
| Total number of hours per week spent on all research projects? |  |

**2.1 Qualifications**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date (mm/dd/yy)** | **Qualification** | **Group Leader** | **Location** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**2.2 Positions held in the last 5 years**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Start date (mm/yy)** | **End date (mm/yy)** | **Job title** | **Group Leader** | **Location** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**2.3 Publications**

|  |
| --- |
| **3-5 Most relevant publications from the last 5 years that support this application:** |
|  |

**2.4 Key Research Achievements of Applicant**

|  |
| --- |
| Please highlight 3-5 key research achievements and outputs (e.g. preprints, training delivered, contribution to consortia, community outreach, patents, key datasets, software, novel assays and reagents etc.). Describe what you have discovered/developed, why it’s important and what its impact and influence have been in your field. **Maximum 500 words.** |
|  |

1. **Skills Exchange and Development Opportunity**

**3.1 Opportunity Description**

|  |
| --- |
| Please consult the ACED Skills Exchange and Development Award Guidance for completing your opportunity description, including required content (Section 2.2 of the Guidance; table within this section describes the content required). **This section should not exceed two A4 pages, including figures but excluding references**. |
|  |

**3.2 Benefit to the wider Alliance community**

|  |
| --- |
| Detail the actual and potential benefits to the wider Alliance community. **Maximum 300 words.** |
|  |

**3.3 Data Sharing Plan**

|  |
| --- |
| Briefly outline your data sharing plan for this application (if applicable), including with researchers external to the Alliance. **Maximum 250 words.** |
|  |

**3.4 Visa Requirements**

|  |
| --- |
| Do you require a visa to participate in this opportunity? If yes, please detail approximate timelines for processing. **Maximum 250 words.** |
|  |

1. **Additional Research Information**

**4.1 Animal Studies**

|  |  |
| --- | --- |
| Does the proposed opportunity involve the use of animals?  **If no, continue to 4.2.** |  |
| Animal species used: |  |
| Are any of these animals genetically modified? |  |
| Status of license covering animal usage: |  |
| For any animal studies to be performed outside of the UK, we also require a letter to be included with this application from the relevant applicant leading this work to confirm that the research proposed will adhere to all relevant local regulatory systems, and also that the welfare standards will be consistent with UK standards. | |

**4.2 Human Studies**

|  |  |
| --- | --- |
| Does the proposed opportunity involve human tissue samples?  **If no, continue to 4.3.** |  |
| Does the work require approval from the appropriate research ethics service? |  |
| Research Ethics Application Status: |  |

**4.3 Other Regulatory Approvals**

|  |  |
| --- | --- |
| Does the proposed opportunity require other regulatory approval? |  |
| If yes, please describe the type, status and the license number: | |
|  | |

**4.4 Human Stem Cell Research**

|  |  |
| --- | --- |
| Does the proposed opportunity involve the use of any human stem cells? |  |
| If yes, please describe the human stem cell types below. | |
|  | |

**4.5 Commercial Outputs**

|  |  |
| --- | --- |
| Do you anticipate that the proposed opportunity will result in any output which can be translated to cancer patient benefit or otherwise commercialised? |  |
| If yes, briefly describe any commercial and/or translational opportunities from the proposed  work: | |
|  | |

**4.6 Research Classification**

What type of cancer(s) is the proposed opportunity relevant to?

|  |
| --- |
| Type of cancer: |
|  |

**4.7 Cell Lines (only complete if applicable)**

|  |
| --- |
| Please provide details of any cell lines you will use in your skills exchange and development opportunity, addressing the questions outlined in the ACED Skills Exchange and Development Award Guidance (Section 2.3 of the guidance, relevant heading in the provided table). |
|  |

**4.8 Animal Studies (only complete if applicable)**

|  |
| --- |
| Please provide details of any research involving animals that you will use in your skills exchange and development opportunity, addressing the questions outlined in the ACED Skills Exchange and Development Award Guidance (Section 2.3 of the guidance, relevant heading in the provided table). |
|  |

1. **Financial Details**

Please refer to the ACED Skills Exchange and Development Award Guidance for instructions on completing this section. Please add more rows to the respective tables as necessary. **Costs should be reported in the country in which they are incurred in (e.g. GBP (£) for UK and USD ($) for US).**

**5.1 Travel and Accommodation Details**

For travel include details of departure and return arrangements. For accommodation, include any relevant expenses of rent costs, bills, transportation, etc. as separate lines.

|  |  |  |
| --- | --- | --- |
| Description | Duration (days) | Costs Total (£ or $) |
|  |  |  |
|  |  |  |
| Justification: | | |
|  | | |

**5.2 Running Expenses**

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Additional Information | Duration (days) | Costs Total (£ or $) |
|  |  |  |  |
| Scientific justification: | | | |
|  | | | |

**5.3 Additional Fees**

Include any additional fees, including any training fees, visa and/or administrative fees, etc.

|  |  |  |  |
| --- | --- | --- | --- |
| Description | Additional Information | Duration (days) | Costs Total (£ or $) |
|  |  |  |  |
| Justification**:** | | | |
|  | | | |

**5.4 Financial Summary**

|  |  |  |  |
| --- | --- | --- | --- |
| Travel and Accommodation Costs  (£ or $) | Running Expenses  (£ or $) | Additional Fees  (£ or $) | Total Costs  (£ or $) |
|  |  |  |  |

1. **Letters of Support**

A Letter of Support must be included from the institution you wish to visit (e.g. the Principal Investigator of the relevant team). This letter should briefly detail the skills exchange and development opportunity and outline their support in you pursuing this opportunity. Submit any Letters of Support in PDF format, signed, dated and on headed paper alongside your completed application.

1. **Declaration**

|  |  |
| --- | --- |
| I declare that the information provided in this application is true and is in accordance with the International Alliance for Cancer Early Detection Collaboration Agreement. Additionally, I confirm the following:  **No research misconduct or workplace misconduct on part of persons named on this application:** The host institution and applicant confirm that, to the best of their knowledge and except as has been notified to CRUK in writing:   * **No research misconduct investigations or findings:** there are no research misconduct allegations currently under investigation involving the applicant or any other person named on this application, nor has any allegation of research misconduct been upheld in the previous five years; * **No bullying or harassment findings:** there have been no upheld findings of bullying, or harassment against the applicant nor any other employee of the host institution who is named on the Application. See further [CRUK’s Policy on Dignity at Work in Research](https://www.cancerresearchuk.org/funding-for-researchers/applying-for-funding/policies-that-affect-your-grant/policy-on-dignity-at-work-in-research). CRUK reserves the right to reject the application or ask that the relevant individual(s) be removed from it. | |
| **Applicant Name:**  **Date:** | **Applicant Signature:**  **Date:** |
| **Host Institution #1 Approver Name:**  **Date:** | **Host Institution #1 Approver Signature:**  **Date:** |