**Discovery Research Grant 2021**

**Preliminary Application Form**

**Data Processing Notice**

During the preliminary application stage of the Discovery Research Grant, we will process your personal data for the purpose of assessing and selecting the best projects to move forward to the full application stage. By sending your application to us, you are giving your consent for us to process your personal data for this purpose.

As part of this, we will:

* Share your completed application form with Alzheimer’s Research UK, **if your application is submitted under the area of ‘Research to understand the links between hearing loss and dementia’**, as they are co-funding applications in that area this year. They will also only process your personal data according to the purpose above and in line with this information.
* Share your completed application form with Cystic Fibrosis Trust, **if the proposed research focus of your application is on aminoglycoside-induced ototoxicity**, as they are co-funding applications in that area this year. They will also only process your personal data according to the purpose above and in line with this information.
* Share your application form with our Discovery Research Grant Medical Research Review Panel. Our review panel is bound by our [Code of Conduct](https://rnid.org.uk/wp-content/uploads/2020/11/ConflictOfInterestPolicy2020.pdf). They will assess all preliminary applications and recommend which applicants should be invited to submit full applications to the scheme. Once the assessment process is concluded, and applicants have been informed of the outcomes of the preliminary stage, all personal data held by the panel for this purpose will be deleted.
* Keep a copy of your personal data for no more than 5 years after the date on which applicants are informed of the outcomes of this funding round. This allows us to monitor re-submissions appropriately, and to assess the current research landscape. After 5 years (if not before), we will delete all personal data associated with your application. If you are successful in being invited to submit a full application to us, we will provide further information to you at that time about further use of your personal data.

All personal information we hold about you will be kept securely, using a variety of security technologies and organisational procedures to help protect your personal information from unauthorised access, use or disclosure.

Our Data Protection Officer can be contacted by calling 020 7359 4442, email [legal@rnid.org.uk](mailto:legal@rnid.org.uk) or in writing to RNID, Brightfield Business Hub, Bakewell Road, Orton Southgate, Peterborough, PE2 6XU.

You have the right to access, change, destroy, withdraw consent, or change how we use the personal information we hold about you. Please contact us at: [research@rnid.org.uk](mailto:research@rnid.org.uk) or call 0203 227 6158, if you would like to do so.

If you are unhappy with how we handle your personal information, or how we handle any requests you make, you can complain to the Information Commissioner’s Office: [www.ico.org.uk/concerns](http://www.ico.org.uk/concerns) or call 0303 123 1113.

**Discovery Research Grant 2021**

**Preliminary Application Form**

**Please submit your application form as a WORD DOCUMENT to** [**ProjectGrant@rnid.org.uk**](mailto:ProjectGrant@rnid.org.uk) **– applications sent as PDF documents will not be accepted.**

**General details**

1. Applicants (Do not list more applicants than fields available)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Title | First name | Surname | Affiliation |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |

1. Contact details – Applicant 1 (This should be the project lead)

|  |  |  |  |
| --- | --- | --- | --- |
| Email Address |  | | |
| Postal Address |  |  |  |
| Telephone |  |  |  |

1. Project administration

|  |  |
| --- | --- |
| Institute/Authority who will administer the grant if awarded: |  |
| Department accommodating the project: |  |
| Proposed start date | dd MMM yyyy (between 1 April and 30 September 2022) |
| Proposed duration | months |

1. Collaborators

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Title | First name | Surname | Affiliation |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |

**Project details**

1. Project title

|  |
| --- |
|  |

1. Project area *(*Select only one area - see the Discovery Research Grant call and guidelines for full details).

|  |  |
| --- | --- |
| Research to understand the links between dementia and hearing loss. |  |
| Research to underpin the development of treatments for hearing disorders, including tinnitus. |  |
| Research to improve how new treatments for hearing loss and tinnitus are developed and tested. |  |

|  |  |
| --- | --- |
| Please tick this box if your project is in the area of aminoglycoside-induced ototoxicity. |  |

1. Re-submission status

|  |  |  |  |
| --- | --- | --- | --- |
| Is this a re-submission of a previous application? |  | Yes | No |
| If yes, please provide the title of the previous application, and the year(s) in which it was previously submitted. | | | |

1. Please confirm that:

|  |  |
| --- | --- |
| * 1. All named applicants and collaborators have read the Discovery Research Grant Scheme Call and Guidelines and this application, and, if the application is successful, agree to work closely with RNID as appropriate. The lead applicant shall be actively engaged in and in day-to-day control of the project. |  |
| * 1. Your Head of Department has read this application and confirms that, if granted, the work will be accommodated and administered in the Department. |  |
| * 1. You confirm that you have read the Fair Processing Notice on page 1 of this application form about how RNID will use your personal data, and you give consent for your personal data to be used in this way. |  |
| * 1. You confirm that all named co-applicants and collaborators have read the completed application form, and have given their consent to be included in the application. |  |
| * 1. You confirm that all named co-applicants and collaborators have read the Fair Processing Notice on page 1 of this application form about how RNID will use their personal data, and have indicated to you that they give consent for their personal data to be used in this way. |  |

1. Reviewers

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Suggest four suitable external reviewers to peer review the full grant application, should you be invited to submit one. Please do not suggest any current member of our Discovery Research grant review panel – please see [our website](https://rnid.org.uk/hearing-research/im-a-researcher-looking-for-funding/discovery-research-grant/) for the current membership. We may send your application to other reviewers of our choice.  **If you do not suggest reviewers, we will not accept your application.** | | | | |
|  | First name | Surname | University | Email |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| Please indicate any individuals or groups who should not be contacted to review this application (giving a brief reason in brackets, such as a conflict of interest): | | | | |
|  | | | | |

Description of proposed project

Maximum 2 sides of A4 (margins of 2 cm on each side), excluding references. Minimum font size 11pt, Arial or Times New Roman, single spaced. Answer the questions given. Up to two figures may be included, but are part of the 2 page limit. All text on this page can be removed to provide more space, but you may find that using the questions below as headings is useful in structuring your description. References are not included in the 2 page limit.

1. **What is your research question and hypothesis? Why is your research question important for the Project area you have selected in Section 6?**
2. **Briefly state the background to your project.**
3. **What pilot experiments have you conducted to demonstrate that your proposal is feasible?**
4. **What is your plan of investigation? Include relevant methods and techniques.**
5. **What are the expected outcomes and impact of your study?**
6. **If you have previously submitted the proposal to us, please detail what changes you have made.**