**Fill in form and** **mailto:traingrants@fsbi.org.uk**

FSBI Training Grant Application form

# Personal Information

 First Name(s) Last Name(s)

|  |  |
| --- | --- |
|  |  |

 Date of Birth Work Address

|  |  |
| --- | --- |
| Click or tap to enter a date.  |  |

|  |  |
| --- | --- |
|  |  |

 Preferred Email Telephone/mobile number

 Date of FSBI Membership (when you first signed up)

|  |
| --- |
| Click or tap to enter a date. |

|  |  |
| --- | --- |
|  |  |

 Highest Academic Qualification Current Position (BSc, MSc, PhD, Post doc, etc)

 Subject Area

|  |  |  |
| --- | --- | --- |
|  |  |  |

Is your position permanent? If Yes, when did you start this position?

|  |  |
| --- | --- |
| Yes [ ]  No [ ]  | Click or tap to enter a date. |

Have you previously applied for a training or other FSBI grant?

Yes [ ]  No[ ]

If Yes, please outline which course and when you received the most recent (up to three) training grant(s). Please enter the amount requested, and amount received for each.

|  |  |  |
| --- | --- | --- |
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| --- | --- | --- |
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Can you meet the criteria for the FSBI training grant? Including providing a short report and review on the training within 6 weeks of completing the training? [ ]

(See information on the training grant T&C’s for more information)

# Course details and importance

|  |  |  |
| --- | --- | --- |
|  |

|  |
| --- |
|  |

 Course Provider |

 Course Name Course Location

Details of course contents



Relevance to the aims of the FSBI



Relevance to the application and research aims



 Date of Training

|  |  |
| --- | --- |
| Click or tap to enter a date. |  |

# Costs

 Total cost of training (£) Estimated total cost of subsistence (£)

|  |  |
| --- | --- |
|  |  |

 Number of days Cost per day (£) Total (£)

|  |  |  |
| --- | --- | --- |
|  |  |  |

 Course Fee (£) Amount requested from the FSBI (£)

|  |  |
| --- | --- |
|  |  |

 Other funding sources applied for



 Other funds obtained and amounts



# Declaration

 Name and Address of supervisor/ Line manager



## **Declaration**

I hereby declare that the above information is correct, to the best of my knowledge. I have read the Information & Conditions document available from the FSBI Training Grants web page and I will abide by the conditions of award.

(Check the box below and apply the current date).

[ ]  Click or tap to enter a date.