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The Technician Commitment Collaboration Fund 2021

**Application form:**

Please submit your completed form to [carly.dellar@gatsby.org.uk](mailto:carly.dellar@gatsby.org.uk) by **15 February 2021.**

Please refer to the fund guidance document prior to completing your application form.

|  |  |
| --- | --- |
| **Title of proposal** |  |
| **Amount requested** |  |
| **Start and end dates** |  |

**Details of collaborators**

|  |  |
| --- | --- |
| **Name of lead collaborator(s)** |  |
| **Role** |  |
| **Institution (must be a Technician Commitment Signatory)** |  |
| **Phone** |  |
| **Email** |  |

**Details of co-collaborators (please a**dd more rows if necessary)

|  |  |
| --- | --- |
| **Co-collaborator name** |  |
| **Institution** |  |

|  |  |
| --- | --- |
| **Co-collaborator name** |  |
| **Institution** |  |

**Summary**

Please provide a short summary of the collaboration. Please outline the primary aims and vision of the collaboration (maximum 250 words).

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**Proposal**

Provide further details of the collaboration and explain how it will meet the criteria provided in the call guidelines. Please include details of anticipated outcomes and impact.

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**Collaboration Plan**

Please provide a brief timeline for your proposed project.

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**Evaluation**

State how you propose to monitor progress of the project and evaluate effectiveness

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|  |

**Breakdown of Costs**

Please provide a spending breakdown of the amount requested (please add more lines as required).

|  |  |
| --- | --- |
| **Item** | **Cost (£)** |
|  |  |
|  |  |
|  |  |
| Total |  |

*N.B. If the main applicant is not the institution’s Technician Commitment lead, please include a letter of support with this application form.*