# Appendix 1: Integrated Clinical Academic Pre-Doctoral Award – Checklist

|  |  |  |
| --- | --- | --- |
| **Name:** |  | |
| **Area of clinical academic interest:** |  | |
| **Contact details: Email:**  **Telephone:** |  | |
| CriteriaPlease ensure you have provided all the information listed below before submission. Incomplete submissions may not be considered. | | **Evidence submitted (yes/no)** |
| **1. Registration with an appropriate UK regulatory and professional body**  Regulatory/professional body: …………………………………………………….  Registration number: ……………………………………………………………… | |  |
| **2. Curriculum Vitae confirming the following;**  a) Employment with a provider of health and/or care providing at least 50% of its services free at the point of delivery, where the applicants spends at least 50% of their current role delivering health and/or care services which are free at the point of delivery  b) Minimum of 2 year’s post registration practice | |  |
| **3. Cover letter (on headed paper) including;**   1. Reason for applying for the award and capability to continue on a clinical academic career pathway 2. An overview of the benefits and learning which will be gained by undertaking the award 3. Understanding of how clinical practice and research can improve the quality of patient care 4. Outcomes that will be achieved by the end of the award 5. Ability to complete objectives within 6 months | |  |
| **4. Letter of support from line manager (on headed paper).** *It is also recommended that you liaise with the Head of Research within your organisation.* | |  |
| **5. Letter of support from clinical academic supervisor (on headed paper)** | |  |
| **6. A detailed spending plan of up to £10,000 for the award period** | |  |

I can confirm that I meet the criteria for a Clinical Academic Transitional Award and I have submitted all of the evidence described above;

**Signed:** …………………………………………………………….. **Date:** ………………………