



PLEASE TYPE DIRECTLY ONTO THIS APPLICATION FORM. Please use Calibri font size 10 if possible.

PURPOSE OF BSAC VACATION SCHOLARSHIPS:

Vacation Scholarships are designed to give undergraduates experience in research. Each research project should be designed so that it could be completed in the time available (up to 10 weeks).

VALUE OF THE SCHOLARSHIP:

Successful candidates will be paid a grant of £270 per week for up to 10 weeks and the Department will be paid a consumables grant of £500. Payment will be made direct to the Secretary/Finance Officer of the Institution who will administer the grant.

CONDITIONS:

Candidates should be in the middle years of a full-time first degree course in the sciences, medicine, veterinary medicine or dentistry. *Only undergraduates are considered for these scholarships.*

Projects designed to be presented as undergraduate or postgraduate laboratory practical assignments will not be considered.

Vacation scholars must submit a report to BSAC within two weeks of the end of their award period, normally by mid-October of the same year the grant is awarded. Reports should be no more than 3 pages in length and contain a brief commentary by the supervisor as to whether the objectives of the research have been achieved, plus a brief outline of the performance of the Vacation Scholar (commitment, conscientiousness etc.).

The Head of Department agrees to house the research and to supply adequate facilities for the research to be carried out. Only one application can be submitted per department. BSAC should be informed immediately if the department is unable to supply adequate facilities for the research to be conducted.

HOW TO APPLY:

Applications must be submitted via the [BSAC online submission system](#). Any additional information relating to the “short statement of the proposed research” on page 2 of this form should not be more than one additional A4 sheet.

Applications are considered at the BSAC Grants Committee meeting in May of each year. Applicants are notified of the outcome of their application no later than 31 May.

ADDRESS FOR COMMUNICATION:

All correspondence, including submission of final reports should be sent via email to: grants@bsac.org.uk

CANDIDATE DETAILS:

TITLE & FULL NAME	
DATE OF BIRTH	
UNIVERSITY/COLLEGE*	
TYPE & SUBJECT OF DEGREE	
LENGTH (YEARS) OF DEGREE COURSE	
COURSES/UNITS/ MODULES COMPLETED (WITH RESULTS) FAILURE TO COMPLETE THIS SECTION OF THE FORM WILL RESULT IN THE APPLICATION BEING AUTOMATICALLY DISMISSED	

*Where the applicant is a full time undergraduate

HOST INSTITUTION / SUPERVISOR:

NAME OF PROJECT SUPERVISOR	
PRESENT POST	
DEPARTMENT ADDRESS	
TELEPHONE	
EMAIL	

RESEARCH PROJECT:

THE TITLE OF THE PROJECT
PERIOD FOR WHICH SUPPORT IS SOUGHT (MAXIMUM 10 WEEKS):
PROPOSED START DATE:
<p>SHORT STATEMENT OF THE PROPOSED RESEARCH including (i) work leading up to the project, (ii) the objectives, (iii) method(s) of investigation, and (iv) the specific training this studentship will provide. We request applicants submit information in this order.</p> <p>Continuation of undergraduate projects <u>will not be considered</u> (see conditions relating to Vacation Scholarship Grants).</p> <p>[Please continue on a maximum of one separate A4 sheet] Any additional information relating to this short statement should not be more than one additional A4 sheet.</p> <p><u>NOTE:</u> Applications must be submitted online at www.bsac.org.uk</p>

APPROVALS:

Head of Department: I confirm that:

1. Funding for this project and student is not being sought from another institution / source.
2. I have read this application and understand all terms and conditions for the grant
3. I agree to the research being carried out in my department and to abide by the terms of the conditions.

**Signed
(Head of Department):**

**Name
(Head of Department):** **Date:**

**Signed
(Project Supervisor):**
(if different from Head of Department)

**Name
(Project Supervisor):** **Date:**

SECRETARY/FINANCE OFFICER OF THE INSTITUTE:

I confirm that if a grant is made I will ensure that the funds provided are used for the purpose for which they have been given. I also confirm that it is our intention to maintain support for this department during the period for which the grant is requested and to abide by the terms and conditions of the grant.

**Signed
(Finance Officer):**

**Name
(Institute Finance Officer):** **Date:**