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| **London Arts & Humanities Doctoral Training Partnership**  **Collaborative Doctoral Award**  **2021-22 Application Form** | **APPLICANT DECLARATION**  **I would like to be considered for a LAHP Collaborative Doctoral Award Studentship and I hereby give consent for my application to be used by the LAHP Selection Panels.** | |
| **SIGNATURE:** | **DATE:** |

1. Personal Details

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| First name: | Surname/ Family name: |
| Address (for correspondence): | Email: |
| Tel. no: |
| Student ID (where known): |
| Residency status: which countries have you resided in for the last 3 years?  Please list with dates |  |

2. Project

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| **CDA Project Title:** |
| **First Academic Supervisor’s Full Name:** |
| **First Academic Supervisor’s Institution:** |
| **First Academic Supervisor’s Department:** |
| **First Academic Supervisor’s email address:**  *(Please ensure this information is correct)* |
| **Second Academic Supervisor’s Full Name:** |
| **Second Academic Supervisor’s Institution:** |
| **Second Academic Supervisor’s Department:** |
| **Second Academic Supervisor’s email address:**  *(Please ensure this information is correct)* |
| **Collaborative Partner’s Institution**: |
| **Collaborative Partner’s Lead Contact**: |
| **Collaborative Partner’s Lead Contact’s email address:**  *(Please ensure this information is correct)* |

3. Programme application details

Please give details of your MPhil/PhD programme application:

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| Chosen LAHP institution:  University College London  King’s College London  School of Advanced Study  London School of Economics  and Political Science  Queen Mary University London  Royal Central School of Speech and Drama  Royal College of Art  Royal College of Music | | |
| HEI Application Number:  *The HEI Application ID is the identification number you would have received when you made your PhD application to your chosen LAHP institution.* | Title of programme: | |
| Department/Institute: | Mode of Study:  Full-time   Part-time | Start date of programme: |
| Please select AHRC subject classification  *For further descriptions, see:* [ahrc.ukri.org/funding/research/subjectcoverage/ahrc-disciplines](http://ahrc.ukri.org/funding/research/subjectcoverage/ahrc-disciplines) | *Choose from:*   * *Archaeology* * *Art History* * *Classics* * *Creative Writing* * *Cultural and Museum Studies (incl. Cultural Geography and Area Studies)* * *Design* * *Development Studies & Political Science & Intl Studies* * *Drama and Theatre Studies* * *English Language and Literature* * *Ethnography and Anthropology* * *Film Studies* * *History* * *Information and Communication Technology* * *Law and Legal Studies* * *Linguistics* * *Media* * *Modern Languages* * *Music* * *Philosophy* * *Theology, Divinity and Religion* * *Visual Arts* |  |

4. Professional/Practitioner experience relevant to the CDA project

You may supply employment details and/or details of practitioner experience here which you consider are most relevant to your preferred study programme.

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| Employer Name | Title of Position | Roles and Responsibilities | Start Date | End Date  *(leave blank if this is your current position)* |
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**5. Academic Qualifications**

Please summarise your academic qualifications.

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| University/ Institution: | Country of University / Institution | Qualification Title (e.g. MA, BA) | Qualification Subject | Start Date | Award Date | Class/ Grade of degree |
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6. Awards, Prizes and Achievements and/or Professional Qualifications

You may enter additional achievements relevant to your application.

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| Achievement: | Institution/ Provider | Award Date | Description of award, professional qualification etc. |
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7. Previous academic funding

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| Have you previously applied for LAHP funding?  Yes  No | | | | |
| If yes, when did you receive LAHP funding?  Have you previously been awarded any funding? If so, please provide details here.  *Please note that you may only hold one funding offer at a time. This means that if you are in receipt of an award from another funder, you can accept the LAHP offer, but must reject the earlier offer before doing so* | | | | |
| Name of Research Council or other funder | Value of award  (currency) | Description of award | Start date | End date |
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8. Research Training

Please provide details of any previous research training you have received, and/or additional specialist training you may need to complete the CDA studentship.

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9. Personal Statement

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| Please upload here a statement covering the following:   * Why you are interested in undertaking the named LAHP CDA studentship; * What relevant existing experience, skills, training and knowledge you would bring to the project; * Any ideas or proposals you have for developing/executing the specified project. * How you may want to contribute to, and benefit from LAHP.   The proposed research section must not exceed **10,000 characters including spaces**. If you exceed this limit, you may be penalised. |

10. References

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| **First referee’s full name:** |
| **First referee’s email address:**  *(Please ensure this information is correct)* |
| **Second referee’s full name**: |
| **Second referee’s email address:**  *(Please ensure this information is correct)* |

11. Confirmation  
By submitting this application, you (the applicant) confirm that:

* the information provided is true and correct
* you give permission for LAHP to obtain further information and documentation, as required, from the relevant academic institution.

I understand that my application for funding is valid only if all required information is provided by the set deadline, which includes:

1. **LAHP Collaborative Doctoral Award Application Form**
2. **a LAHP Diversity Form**
3. **a CV**
4. **copies of academic transcripts for all relevant degrees**
5. **2 References (either 2 academic references or 1 academic reference and 1 professional reference)** Your referees will receive a notification from the portal requesting to submit their references.

Please ensure you submit your application with all the relevant documentation by **29th January at 17.00**

Please upload the following documents here:

1. CV

2. Copies of academic transcripts for all relevant degrees



**12. Student's declaration**

* I confirm that the information I have provided in this form is complete and accurate to the best of my knowledge at this date.
* I have read and I acknowledge the UKRI ‘[Terms and conditions of training grants](https://www.ukri.org/funding/information-for-award-holders/grant-terms-and-conditions/)’.
* I fully understand that it is my responsibility to ensure that the references’ sections of this proposal are completed by 5th February 2021 at 17.00 and that any missing information will render my application ineligible.
* I authorise the LAHP Doctoral Training Partnership to disclose to the UKRI and other LAHP institutions any information that is relevant to my application.
* I consent to LAHP using the email address I have supplied to send me information.

*Data Protection*

*By submitting this application, you agree that LAHP can process your information and keep a copy of your form to collect statistics and detect and prevent fraud. The Data Protection Act allows you to ask us for a copy of all the information we have about your application.*

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| Accept |

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| Signature |  | Date | Click here to enter a date. |