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**Student-led and Alumni-led Activities – Application form**

**1. How to apply:**

1. Applications must be submitted to [info.lahp@london.ac.uk](mailto:info.lahp@london.ac.uk) **by the deadline listed on the LAHP website:**

<https://www.lahp.ac.uk/student-led-activities-fund/>

1. Please submit an electronic copyof the application form, together with supporting documentation.
2. You will receive written confirmation of the outcome within approximately a month of the deadline.

1. Personal details

|  |  |  |
| --- | --- | --- |
| Title: | First name: | Family name: |
| Department (for current students only): | | |
| Address (for correspondence): | | Email: |
| Tel. no: |

Please give details of your current research degree registration (for current students only):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Current  Degree | Subject | Date of Registration | Funding End Date | Full or Part-time | Full name of Principal Supervisor |
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Please give the title / provisional title of your thesis (for current students only):

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Please indicate your current occupation including your job title and the name of your employer (for alumni only):

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2. Previous applications

Please list any previous awards received from the LAHP Student-led and Alumni-led activities fund:

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| --- | --- | --- | --- |
| Purpose (i.e. study visit, conference) | Location | Date of application | Amount received |
|  |  |  |  |

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| 1. Title or brief description of project/activity/event |
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| 1. Names and positions of lead LAHP-funded student and/or staff coordinators, with contact details |
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| 1. Target participants; please also give an estimate of numbers |
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| 1. Further details of project/activity (max. 500 words) |
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| 1. Case for Support including timeline and / or milestones (max. 400 words) |
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| 1. Estimated costs & justification of costs |
| *Please also indicate your total budget (including venue hire costs), and the proportion of costs covered by this application.* |
| 1. Have you applied for funds elsewhere? If so, please provide further details. |
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| 1. Estimated start and finish date |
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Supervisor’s endorsement (for current students only)

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| --- | --- | --- |
| Applicant’s full name (please print): | | |
| Department: | | |
| Full name of Supervisor (please print): | | |
| Supervisor’s department (for correspondence): | Email: | |
| Tel: | |
| **Supporting Statement:**   * Please indicate the relationship of the proposed activity to the student’s research. * Students with Completing Research Student / Writing Up status are not eligible to apply to this Fund. | | |
| Signature of Supervisor: | | Date: |