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|  | | **HEIF**  **Knowledge Exchange**  **Funding** | | |  | | | |
| **APPLICATION FORM** | | | | | | | | |
| The University’s HEIF Plan seeks to support income-generating activities across the spectrum of knowledge exchange. This application form allows you to apply for funds from the HEIF funds allocated to MPS. If you have any queries please contact **Nile Amos**, our Business Partnership Manager for Future Technologies: [N.J.Amos@sussex.ac.uk](mailto:N.J.Amos@sussex.ac.uk) | | | | | | | | |
| **Part 1** | | | | | | | | |
| **Name of Principal APPLICANT (PA):** |  | | | | | | | |
| **Contact details of PA:** | Department | | | Email | | | | |
| **Strand** | ❑ Early-stage proof of concept projects  ❑ Market assessment projects  ❑ Other | | | | | | | |
| **Title of Proposed Activity:** |  | | | | | | | |
| **Name, Title and Department of any Co-Applicants(s)** |  | | | | | | | |
| **Total funding requested:** | £ | | **Start Date** | | | **End Date** | | |
| **Part 2 PROposed activities (maximum 1000 words)**  *Please describe the proposed activities and how they fit with the review criteria of the call. Project objectives and methodology should be included here. Include a brief timetable, detailing how you will be able to spend the money by end of the financial year. Please attach supporting documentation (including letters etc). Details should be appropriate for the amount of money requested.* | | | | | | | | |
|  | | | | | | | | |
| **Part 3 Expected OUTCOMES (maximum 500 words)**  *Please explain the anticipated outcomes and the routes to commercialisation. Where applicable identify follow-on funding requirements. Detail any intellectual property (including patents, know how) that will be strengthened in this project and explain how that intellectual property will be protected and exploited. For market assessment projects explain what you expect to clarify from the project. For kick start pilot projects explain how funding will catalyse a larger and longer term partnership with a company.* | | | | | | | | |
|  | | | | | | | | |
| **PART 4 BUDGET**  *Provide a* ***breakdown*** *of the funds requested, e.g. staff costs, travel and subsistence, consumables.*  For staff costs, please refer to the [guide to REED staff costs](https://www.sussex.ac.uk/webteam/gateway/file.php?name=reed-managed-services-rate-of-pay.pdf&site=262) | | | | | | | | |
| **Description of expense** | | | | | | | **Amount** |
| *e.g. research assistant for X days @ £xxx per day* | | | | | | | **£** |
| *e.g. Travel* | | | | | | | **£** |
|  | | | | | | | **£** |
|  | | | | | | | **£** |
| **Total:** | | | | | | | **£** |

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| **Please submit this form electronically to**  [mpsresearchsupport@sussex.ac.uk](mailto:mpsresearchsupport@sussex.ac.uk) |