# SECTION 1 – ABOUT YOU

**Your details**

|  |  |
| --- | --- |
| **Full Name** |  |
| **Job Title / Occupation** |  |
| **Department** |  |
| **Employer** | Please select your employer from this dropdown list... |
| **Email address** |  |
| **Phone Number**  |  |
| **Name of line manager** |  |
| **Is this a group application?**  | Please choose either Yes or No... |
| **Total number of applicants\***  |  |
| **Are you applying for Events / Education & Training OR A Visit?** | Choose an option from this dropdown list |
| **How did you hear about the Keith James Grants?** | Choose an option from this dropdown list  |

\**There is space further on in the form to tell us about the other applicants if this is a group application.*

**Question 1: Please tell us a bit about yourself, your current role and how your work relates to cancer services (max 150 words).**

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# SECTION 2 – ACTIVITY DETAIL

There are 2 options below: **EVENTS, EDUCATION & TRAINING,** and **VISITS**. Only complete the relevant section linked to the activity you are seeking funding for.

Please ensure you have read the guidance before completing this section. This contains details on what we are able to consider funding as part of the Keith James Grants and has our full terms and conditions.

## Option 1 – EVENTS, EDUCATION & TRAINING

This offers opportunities for individuals or groups to attend events locally, nationally or internationally that can have a beneficial impact on their role.

This may include: conferences, professional study days, training courses and networking events. This list is not exhaustive, and we encourage you to submit applications for activities that will ultimately deliver benefit to patients and cancer services.

|  |  |
| --- | --- |
| **Name of activity** |  |
| **Duration** |  |
| **Start date** |  |
| **End date** |  |
| **Venue** |  |
| **Location** |  |
| **Activity provider / host** |  |
| **Weblink for activity (if available)** |  |

**Question 2: Why do you want to attend this activity? How does it relate to your work? How will your learning from this activity benefit your role and / or cancer services in Wales? (max 150 words)**

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**Question 3: How do you intend to disseminate, or make use of, your learning from this activity within your workplace to benefit patients and / or your colleagues? (max 300 words)**

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**If you would like to attend this activity with other colleagues in your organisation please provide their details below.** (Copy and reuse the table as many times as required).

Colleagues who wish to attend but are employed by a different organisation will need to complete a separate application form.

|  |  |
| --- | --- |
| **Full Name** |  |
| **Job Title / Occupation** |  |
| **Department** |  |
| **Email Address** |  |

## Option 2 – VISITS

This offers opportunities for individuals or groups to learn how cancer services in Wales can be improved through a variety of ways such as:

* Visiting or shadowing leaders / teams nationally or internationally
* Exposure to new skills, techniques, or operational models of delivery that could be beneficial to Wales.
* Forging or deepening links with experts and leaders in the field of cancer with the aim of developing ideas for future collaboration and / or improvement.

Our guidance document provides a more comprehensive overview of what we will consider funding to help you shape your application.

|  |  |
| --- | --- |
| **Name of what you are seeking to visit / observe / learn** |  |
| **Duration of visit** |  |
| **Proposed start date** |  |
| **Proposed end date** |  |
| **Institution / Venue** |  |
| **Name of key contact at host intuition / venue** |  |
| **Location**  |  |

**Question 2: Please outline what and where you intend to visit and why? What do you hope to learn? How does it relate to your work? How will it benefit your role and / or cancer services in Wales? (max 400 words)**

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**Question 3: How do you intend to disseminate your learning from this visit within your workplace to benefit your patients and / or your colleagues? (max 400 words)**

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**If you are applying as a team / group from your organisation, provide the details of other team / group members here.** (Copy and reuse the table as many times as required).

Colleagues who wish to attend but are employed by a different organisation will need to complete a separate application form.

|  |  |
| --- | --- |
| **Full Name** |  |
| **Job Title / Occupation** |  |
| **Department** |  |
| **Email Address** |  |

# SECTION 3 – COSTS

Complete this table, adding any additional rows as required, to outline all the anticipated costs associated with your activity. We appreciate that some costs, particularly in relation to VISITS may be estimates at this stage – please be as accurate as possible and make a note in the detail column of anything that is an estimate or that you are unsure of.

**If you are applying as a group, please ensure the costs below reflect the total amount requested.**

All costs should be given in GBP on the application form. Costs in other currencies, e.g. tickets for a conference in Europe that are priced in Euros, should be converted using <https://www.xe.com/en-gb/currencyconverter/>

Please see the guidance document for information on eligible costs, travel and subsistence rates and help on how to complete this section.

|  |  |  |
| --- | --- | --- |
| **Costs** | **Detail** | **Total Cost (GBP)** |
| e.g. Conference Fee |  |  |
| e.g. Train Fare |  |  |
|  |  |  |
| **Sub-total: Activity & travel costs** | **£** |
| **Please complete the table below if you require accommodation and subsistence - rates and conditions are set out in Appendix 2. Please use the maximum upper allowance multiplied by the ‘total number’ required to calculate your costs.** |
| **Accommodation / Subsistence** | **Detail** | **Total number** | **Total Cost (GBP)** |
| Overnight accommodation | Up to £200 per night in major cities |  |  |
| Overnight | Up to £120 per night elsewhere |  |  |
| Breakfast | Up to £5 |  |  |
| Lunch | Up to £10 |  |  |
| Evening meal | Up to £25 |  |  |
| **Sub-total: Accommodation & subsistence** | £ |
| **Total costs:**  | £ |

Is backfill resourcing required to enable participants to attend this activity? **Yes / No**

Please confirm you have read the Application Guidance: **Yes / No**

If we fund other people to attend the same activity as you, would you like to be put in touch with them by email? **Yes / No**

**Please note, if you are awarded a Keith James Grant, your employing organisation must pay the costs in full in the first instance; we will reimburse your employer following completion of the activity and following receipt of an invoice for the total costs. We cannot reimburse individuals directly.**

**Please provide details below of the contact in your organisation who will be responsible for booking/arranging the activity and ensuring an invoice is submitted to us on completion (if this is not you).**

|  |  |
| --- | --- |
| **Full Name** |  |
| **Job Title / Occupation** |  |
| **Email Address** |  |

**Disclaimer**

By submitting this application form you confirm that the details you have provided are true and accurate to the best of your knowledge. You also agree to be bound by the Terms & Conditions included at the end of the application form.

Submission of this application does not guarantee approval. We will use the information provided in this application form to assess your application and may contact you for clarity or further discussion to help inform our decision. If your application is successful, Moondance Cancer Initiative will issue an award letter via email.

**By putting an ‘X’ in this box I confirm that I have understood the above disclaimer** [ ]

|  |  |
| --- | --- |
| **Name** |  |
| **Date** |  |

**Submission**

Forms **must be submitted as a word document**; we reserve the right to request re-submission of any forms that come in a different format.

Send your completed form to info@moondance-cancer.wales. Make sure you have read the application guidance before submitting.

# Annex A: Keith James Grants - Terms and Conditions

1. “you”, “your” means the individual / group who has completed the Keith James Grants Application Form. “us”, “our”, “we” means Moondance Cancer Initiative. “Grant” means the grant funding provided by Moondance Cancer Initiative following an approved application to the Keith James Grants.
2. Funding received via a Grant can only be used for the activities set out in the award letter we will issue if your application is approved.
3. Funding received via a Grant cannot be used retrospectively for any activity that has taken place before the Grant was approved.
4. Funding received via a Grant cannot be used towards insurance costs; it is the responsibility of grant recipients to ensure they have appropriate insurance in relation to themselves and the activity being undertaken.
5. To receive the Grant, your organisation must pay the costs in full in the first instance. The organisation will then request payment from us, and we will then reimburse the agreed costs as outlined in the award letter.
6. Any expenditure incurred before the approval of an application is done so at your own risk. There is no guarantee that an application will be approved.
7. In the case of international activities, all entry requirements are the responsibility of the grant recipient, these include, but are not limited to, visas, vaccinations, passport requirements.
8. If the Grant is used in any way other than in accordance with the detail set out in the award letter, then we reserve the right not to reimburse the costs.
9. Individual applications: The Grant is not transferrable to another person without prior approval from us. In the case of group applications, the main point of contact will need to request a change to the group membership and provide full details of the new member and confirmation of who is not attending/travelling. We will consider the request and communicate a decision in writing to confirm if we approve the change.
10. We may publish information about Grants we have made online, e.g website, social platforms, using the full names of recipients along with any photographs or video clips we receive as part of the evaluation process.
11. The support of Moondance Cancer Initiative should be acknowledged in any posters, abstracts, reports or published work that result from a Keith James Grant.
12. Our liability under these terms and conditions is limited to the payment of the Grant.
13. Any new skills, techniques or approaches that are developed as a result of a Keith James Grant are not endorsed by Moondance Cancer Initiative and must go through all appropriate governance processes before being utilised.
14. A recipient of a Keith James Grant is not an employee, volunteer, or representative of Moondance Cancer Initiative
15. The personal data provided in this application will be used to process the application, the making of any Grant and in subsequent follow up with recipients.
16. Payment of the Grant and these terms and conditions shall be governed by the laws of England and Wales.

# Annex B –Keith James Grants Travel and Subsistence Rates

The table below sets out the travel and subsistence rates that are applied to successful applications. We recognise they may differ to those applied by your employer. Full details of what will be funded will be set out in the award letter sent to successful applicants.

|  |  |
| --- | --- |
| **Travel by Train** | All rail travel should be booked as standard class. First class tickets will not be reimbursed. Advanced purchase rail tickets should be purchased where possible and it is expected that you will plan your travel as far in advance as possible in order to obtain the best price.  |
| **Travel by car or motorbike** | Car mileage is paid at 45 pence a mile.Motorcycle mileage is paid at 24 pence a mile.Mileage should be claimed from your home address – venue – home address. If you have collected colleagues as part of car sharing arrangements, then this can also be included within your mileage claim.  |
| **Travel by coach** | Advanced purchase coach tickets should be purchased where possible and it is expected that you will plan your travel as far in advance as possible in order to obtain the best price. |
| **Air travel** | Air travel should be booked as standard / economy class. |
| **Overnight accommodation**  | Up to £200 per night in major cities.Up to £120 per night elsewhere.Where possible a bed and breakfast rate should be booked. |
| **Subsistence**  | Breakfast - up to £5Lunch – up to £10Evening meal – up to £25 |

**Travel**

* We would encourage car sharing where possible to maximise value for money if public transport is not being utilized where a group is being funded.
* The use of taxis will only be considered where such costs are necessary, for example, journeys where there is no public transport available, it is not safe to use public transport, or you are travelling in a group and the cost of a taxi is cheaper than the combined public transport fare.

**Accommodation**

* Where there is a range of suitable accommodation options available, it is expected that you will select the most cost-effective option available, with consideration for safety and proximity to the activity. There is no expectation that you will share a room with a colleague if attending as a group.

**Subsistence**

* Subsistence allowances represent a limit rather than a suggested level of expenditure and they should be applied individually to each meal rather than aggregated to pay for one more expensive meal.
* Where the activity has subsistence included in the cost, e.g. lunch at a conference, breakfast included with hotel booking, we will not reimburse any additional claims if these meals are eaten elsewhere.
* Dinner is applicable if you are staying overnight or will be finishing your journey at a time where it would be appropriate to have dinner.
* Costs, such as mobile phone charges, newspapers, bar bills, mini bar, pay to view TV etc. will not be reimbursed.

If you’re unable to plan your travel within the limits above, please contact Moondance Cancer Initiative for advice – info@moondance-cancer.wales