**Research, Development and CPD Grant 2021-22**

The Royal College of Occupational Therapists Specialist Section: Trauma and Musculoskeletal Health provides five annual bursaries of up to £250 each to support members to participate in R&D or continuing professional development activities. Applications can be made for a bursary at any time throughout the year but once all five have been awarded, additional funds will not be released until the next October.

**Eligibility Criteria**

* All applicants must be an existing member of the RCOT Specialist Section: Trauma and Musculoskeletal Health at the time of application.
* Applicants must not have received a RCOT Specialist Section: Trauma and Musculoskeletal Health bursary during the 12 months prior to application.
* Applications will be considered for support to cover professional or service development opportunity/innovation which have specific costs e.g. conference /study fees, travel costs etc
* The activity for which you are requesting financial support should be related to your professional practice in the fields of trauma, orthopaedics, critical care, prosthetic and amputee rehabilitation, pain management or rheumatology/musculoskeletal health.
* Applications associated with specialist section activities supported through other RCOT routes, will not be considered for these awards
* All successful applicants must agree to give formal feedback within 6 months of approval- this could be in the form of a webinar, conference presentation, poster presentation or article for the RCOT Specialist Section: Trauma and Musculoskeletal Health newsletter. The National Executive Committee will discuss the most appropriate form of feedback.

**Application Procedure**

* The Application for Bursary form must be completed in full and returned to the Research and Development Lead and Chair of the Specialist Section
* An acknowledgement e-mail will be sent on receipt of the application which will advise if all funds for the current year have been allocated. If this is the case it will be necessary for you to reapply when additional funds are released each October.
* Your application will be considered by two National Executive Committee members.
* You will be informed of the decision, within 6 weeks of your application being received.
* At this time, you will be informed of the chosen feedback method
* The committee representatives’ decision is final and there will be no right of appeal.
* Unsuccessful applications are free to re-apply at any time.
* Successful applicants must provide receipts detailing expenditure of awarded funds within 4 weeks of the event taking place e.g. course fees receipt

The committee reserve the right to review the amounts available each year.

**Bursary Application 2021-22**

|  |  |
| --- | --- |
| Name: | Date of Application: |
| Address: | e-mail address: |
|  | RCOT Specialist Section membership type  *(delete as applicable)*  standard / student/ retired/other |
|  |
| RCOTSS TMH membership No: |

**Event/Development/Innovation Information**

|  |  |
| --- | --- |
| Title/description of activity: | |
| Date of activity: | Location: |
| Total attendance fees: | Total travel costs: |
| Other costs- pleas state specific item: | |
| Amount requested: | |
| Other funding sources (e.g. self, employer): | |

Please explain how participation in this activity/development of innovative idea will contribute to your professional development. Please continue in a separate sheet if necessary. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please sign below to confirm that you are a member of the Royal College of Occupational Therapists Specialist Section: Trauma and Musculoskeletal Health and that if successful, you agree to give feedback, in the format as agreed by the National Executive Committee associated with the activity supported.  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signed)

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*For committee use*

Application received on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledgement e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reviewed by (names and committee positions):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_

Decision:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ decision e-mailed:­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ paid by: e-banking /other \_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ committee position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Receipts received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_