Returning Carers’ Fund Application Form

Please read the Returning Carers’ Fund Guidance Document before completing this form.

# Section 1: Personal Details

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| Name (title, first name, family name) |  |
| Job title |  |
| Contract end date, if you are on a fixed-term contract |  |
| Type, length and dates of leave |  |
| Department/Faculty |  |
| Email address and telephone number |  |
| Expected project end date – awards are usually valid for one year |  |

Section 2: Purpose of funding requested   
Indicate the main purpose(s) of the funding requested by ticking the boxes below (tick all that apply; note that the list is not exhaustive).

|  |  |
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| Teaching buyout |  |
| Training or professional development |  |
| Conference attendance |  |
| Funding visits to Oxford by your research collaborator(s) |  |
| Small scale lab/other equipment purchase |  |
| Short-term research or administrative assistance |  |
| Short-term secondment |  |
| Other – please specify |  |

# Section 3: Application questions

Please answer all the questions in the boxes below. There is help text in each box that will need to be deleted and replaced with your answer.

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| **Question 1:** Please describe the impact of Maternity/Paternity/Shared parental or other caring leave on your research/academic career. Include details of further leave (for example furlough for caring responsibilities) if appropriate. |
| Briefly outline the details of your caring leave, and the impact taking caring leave has had on your career path, your trajectory, any missed opportunities or any other area. Be as specific as possible about the impact you have faced, and any exacerbating factors (NB – all applications are confidential) |
| **Question 2:** What is the total sum you are requesting, and for what purpose? |
| Where possible, costs should first be met or part-met from other sources, such as grant funding or departmental sources, and details of any matched funding or other support being provided by your department should be included here.  Please detail what the fund will be used for, and any match funding provided by your department, PI or other sources. Please itemise any costs where they are known (e.g. travel should be broken down by accommodation, flight, etc). If your request includes equipment or consumables, please include information on why these costs cannot be met by another source. |
| **Question 3:** Please provide a detailed breakdown of how you propose to spend the grant and the time period for which the funding is requested |
| Referring to question 2, please give a detailed breakdown of how you intend to spend the grant and over what period.  If your contract end date is within the award period (within one year), please detail your plans for full use of the funds before the end date.  Also include information on how the activity you have planned:  Will help you overcome the specific barriers you have faced as a result of taking leave for caring responsibilities  Will help you gain confidence, skills or material to take your next career steps |
| **Question 4:** Please provide details of the outcomes and impact you expect from the funding, for example, how the grant will help you to re-establish your research and how it will contribute to your career progression. |
| Here is where you speak to the potential impact of this grant if awarded. Referring to the activity you intend to fund from this award (section 5), and you career plans over the coming few years please outline:  How these activities will help you re-establish your research career on returning from leave  How these activities will support you take your next steps (particularly are towards the independence)  Any material outcomes (publications, data for independent grant applications, presentations at conferences etc.)  Any planned funding applications (be as specific as possible)  If you are on a fixed-term contract, outline your plans beyond your contract expiry date. |

# Section 3: Feedback

This section is optional. Please answer questions in the boxes below.

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| **Question 1:** Do you have any suggestions as to other measures that the University might take to better support those taking career breaks? |
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| **Question 2:** How did you hear about the Returning Carers’ Fund? |
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# Section 4: Administration Details (to be completed by your department)

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| --- | --- |
| Two letter department code to which the budget should be allocated, if successful |  |
| Requisition approver code (e.g. xx.Buyer.AA) |  |
| Admin / Finance contact name |  |
| Admin / Finance contact email |  |

# Section 5: Approval and applicant agreement

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| **Applicant’s signature and declaration**  *By submitting this application, I agree to the processing of my personal data, as detailed in the attached privacy notice.*  **Name:**  **Signature:**  **Department/Faculty support**  *Please ask your Head of Research Group, or Head of Department/Faculty Board Chair, and your Departmental/Faculty Administrator to sign this form confirming that:*  *Your contract end date (if applicable) is as given overleaf*  *Your application has been discussed and agreed (including with your college, if applying for a teaching buy-out)*  *You are expected to establish an independent research career*  **Name:**  **Signature:**  **Position:**Head of Research Group/Head of Department/Faculty Board Chair *(delete as appropriate)*  **Date:**  **Name:**  **Signature:**  **Position:**Departmental/Faculty Administrator *(delete as appropriate)*  **Date:** |

**Privacy notice**

**Data protection.** In the course of completing this application, you have provided information about yourself (‘personal data’). We (the University of Oxford) are the ‘data controller’ for this information, which means we decide how to use it and are responsible for looking after it in accordance with the General Data Protection Regulation and associated data protection legislation.

**How we use your data.** We will use your data to assess your application, and administer and evaluate the Returning Carers’ Fund. We are processing your data for these purposes only because you have given us your consent to do so by signing this form. You can withdraw your consent at any time by contacting your divisional contact, as detailed in the Returning Carers’ Fund Guidance Document and on the [Returning Carers’ Fund website](http://www.admin.ox.ac.uk/eop/gender/carers-fund/). In this event, we will stop the processing as soon as we can. However, this will not affect the lawfulness of any processing carried out before your withdrawal of consent

We will only use your data for the purposes for which we collected it, unless we reasonably consider that we need to use it for another related reason and that reason is compatible with the original purpose. If we need to use your data for an unrelated purpose, we will seek your consent to use it for that new purpose.

**Who has access to your data?** Access to your data within the University will be provided to those who need to view it as part of their work in carrying out the purposes described above.

**Retaining your data.** We will only retain your data for as long as we need it to meet our purposes, including any relating to legal, accounting, or reporting requirements.

**Security.** Your data will be held securely in accordance with the University’s policies and procedures. Further information is available on the University’s [Information Security website](https://www.infosec.ox.ac.uk/).

**Where we store and use your data.** We store and use your data on University premises, in electronic form.

**Your rights.** Information on your rights in relation to your personal data are explained [here](http://www.admin.ox.ac.uk/councilsec/compliance/gdpr/individualrights/).

**Contact.** If you wish to raise any queries or concerns about our use of your data, please contact us at [equality@admin.ox.ac.uk](mailto:equality@admin.ox.ac.uk) or the Equality & Diversity Unit, Wellington Square, Oxford, OX1 2JD.