

# 2025 Call for Project Grant Applications in Child Health

## Outline proposal form

Please read the guidelines in the call on our website including assessment criteria and details of any restrictions before starting your application: <https://action.org.uk/research/apply-research-grant>.

Please note that only one application is allowed per research team each grant round.

Please read the 'How to save a Microsoft Form' document on the Action website to ensure you can save this form and return at a later time to edit it.

**Responses that do not adhere to word limits may not be processed - please ensure you check word limits per question.** There are some mandatory questions without which the form cannot be submitted (marked as \*).

**The deadline for the call is 11 February 2025 at 5pm after which you will not be able to start or edit the online proposal form.**

Further details about Action are available on our website at [www.action.org.uk](http://www.action.org.uk)

Our privacy policy can be accessed at this link: <https://action.org.uk/about-us/policies/privacy-policy>.

\* Required

**1. Title of project \***

Maximum 25 words

**2. Principal applicant title \***

**3. Principal applicant initials \***

First and middle names

**4. Principal applicant surname \***

**5. Principal applicant institution \***

**6. Present position of principal applicant \***

**7. Principal applicant contact address**

**8. Principal applicant telephone number**

**9. Principal applicant email address \***

For all communication

**10. Details of UK-based co-applicants**

Co-applicants must be employed in UK based hospitals, universities or research institutes. Those involved in the project outside the UK can be named further down as collaborators.

Please list all co-applicants using full titles, all initials, surnames and institutions.

**11. Collaborators**

If relevant, please give the names of any researchers and their research institutes and/or subcontractors or patient representatives that are not named as applicants but would be collaborating (or providing services) on the project. Collaborators may be based outside the UK.

**12. Length of project \***

In full months (maximum 36 months)

The value must be a number

**13. Estimated total cost to the charity**

Action will only support the direct cost of research. Indirect or directly allocated costs such as shared equipment and resources based on estimates, administrative or other overheads (including any depreciation or maintenance costs) should not be included.

The value must be a number

**14. Estimated salary total**

You should not include percentages of salaries for those already employed in permanent/long term positions, such as the Principal Applicant. \*Provide total salary costs to the charity before tax (gross salary) for the whole project including employer costs of National Insurance, pension and London weighting (if applicable).

The value must be a number

**15. Estimated consumables total**

Enter 0 if no consumable costs applicable

The value must be a number

**16. Estimated equipment costs**

Enter 0 if no consumable costs applicable

The value must be a number

**17. Please indicate whether or not your project is within the remit for consideration for joint funding with one of the co-funders of this project grant round \***

Please ensure you review the remit for each relevant funder.

Action Medical Research only

DEBRA

**18. Briefly describe the aims of this project using non-technical terminology**

Maximum 250 words. Please note that this section may be seen by non-scientists.

**19. Briefly describe how this project fits the remit of Action Medical Research and, if applicable, the remit of the co-funder indicated in question 17**

Maximum 150 words. Please ensure you review the remit for Action, this call and any relevant co-funder. Ensure you make the specific paediatric relevance of your project clear.

20. Indicate the group or groups most affected by the condition to be studied \*

- Unborn children
- Babies
- Babies and Children
- Children
- Children and adults

21. Describe the clinical relevance of this project and the route to clinical application and timeframe and its potential impact.

If this is a clinical study, and if appropriate, have you approached the relevant Clinical Research Network Clinical Studies Group to help with the design of this study? (maximum 200 words).

22. Patient/public involvement

Maximum 70 words. If appropriate please state if you have involved or plan to involve patients or members of the public in the research process. For example, involvement in the choice of research topics, advising on the project design or in carrying out the research. This is a different process to carrying out research on patients or disseminating findings. It involves working with patients or the public rather than simply doing research to, about or for them. For example, if appropriate, you might consider involving a Young People's Advisory Group. Please see <https://www.nihr.ac.uk/explore-nihr/specialties/children-and-young-people.htm> or <https://www.nuffieldbioethics.org/publications/children-and-clinical-research>

23. Briefly outline your aims and objectives and the hypothesis to be tested

Maximum 250 words

24. Outline your proposed research plan

Maximum 500 words. You should describe the methods of research to be used. The study design should be described in sufficient detail for our advisors to understand what is proposed and be able to judge if studies are sufficiently powered.

25. Please list up to 5 recent publications for the principal applicant

26. **Have you (or your co-applicants) applied to the charity or co-funder with this or a related application before?**

Yes

No

27. **If yes, please give the reference number (for a full application) or state if this was an outline application and give brief reasons for the resubmission.**

28. **Do you or your co-applicants have any grants from Action Medical Research or co-funder that are currently active?**

Yes

No

29. **If yes, please give the reference number(s) of any active grants from Action Medical Research or co-funders**

30. **If you or your co-applicants have an active grant with Action or relevant co-funder, are you up to date with submitting the interim/final reports requested?**

Yes

No

Not applicable

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