** **

**APPLICATION FOR A BSCB CHILDCARE AWARD**

The BSCB will provide a contribution to childcare expenses to allow scientists with dependent children to attend *Cell Biology*-related scientific meetings. Applicants are expected to present a poster or give a talk at the meeting and will be notified of the outcome. Eligibility criteria are similar to those for Honor Fell Awards.

Please TYPE or print clearly. Forms without this information or illegible will not be processed

Title......

First name: ....................................

Surname.............................................

Professional Address

.................................................................................................. ...................................................................................................................................... ......................................................................................................................................

Academic Email...........................................................

Degree(s) dates…………………..

**Are you:**

☐ Principal Investigator

☐ Research staff

☐ PhD student

**Bank details**

Sortcode:

Account number:

Bank:

BSCB Membership Number ..................

I have been a member for ……………. years

**Details of the career development activity you wish to undertake:**

**Event title**:

**Place and date**:

**Details of name and age of person(s) you normally care for:**

**Relationship to person(s):**

**Care arrangements normally used:**

**Details of the additional care arrangements required:**

**Please itemize expenses (e.g. travel, childminder, babysitter etc.)**

Please give total costs in local currency and sterling equivalent.

**Total expense claimed:**

Amounts up to £250 can be applied for on any occasion.

Receipts are required to back up the expenses claimed.

**Applicant’s Signature:**

**Name:**

Note:

-Each case will be considered individually.

-The expectation is that the fund will support people who will be away from home overnight or longer, and for whom no viable alternative caring arrangements are possible.

-Eligible costs might include, for instance, the travel expenses for a nursing child and partner travelling with the staff member, or the additional cost or travel expenses of a carer to remain at home with the dependent.

-No more than one award will be made to any individual in a year

**Please upload application as a single merged Pdf containing the following supporting information:**

**-this completed and signed application form**

**-a screenshot of your membership details from**  [https://hg3.co.uk/bscb/members.aspx](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fhg3.co.uk%2Fbscb%2Fmembers.aspx&data=02%7C01%7C%7C3d34393229c34655659f08d6f57469ca%7C4eed7807ebad415aa7a99170947f4eae%7C0%7C0%7C636966277683459986&sdata=SQ2z9dPCMvQ30fK%2BOrPE9%2BsE5mLZvKrfaGI3obSLskE%3D&reserved=0)

**-a copy of your abstract or title of talk (max 1 page A4)** Names of all authors should appear on the abstract

**-a copy of the receipts of expenses (if available at the time of application)**

*> If proof of payment for ALL costs claimed is available at the time of application, successful applicants will be awarded a grant in advance of the meeting*

*> If proof of payment for ALL costs is not available at the time of application, successful applicants will be awarded a provisional grant and funds will be sent when BSCB have received the receipts.*

Awards are discretionary and subject to available funds