

# SAMPLE QUB PGR Application for Funding-Stage 3 - Needs Priority Form

\*\*\*Please ensure to read guidance before completing the application.\*\*\*

<https://www.qub.ac.uk/graduate-school/information/Weekly-update/PGR-covid-support-structure/>  
(<https://www.qub.ac.uk/graduate-school/information/Weekly-update/PGR-covid-support-structure/>).

This is an additional form that students who are applying for funding in Stage 3 can complete if they have experienced additional disruptions or challenges in adapting research. This applies to students with disabilities, long-term conditions, those who are neurodivergent, or who have caring responsibilities.

This form must be completed if you are a UKRI-funded student and your funding end date is after 30 September 2021.

It may be completed by any student who has submitted an application for Funding Extension in Stage 3, i.e. students with funding end date before 30 September 2021.

For more information about support available to students with disabilities, and an outline of a range of disabilities, visit the Disability Services Information for Students <https://www.qub.ac.uk/directorates/sgc/disability/studentinformation/supportavailable/>  
(<https://www.qub.ac.uk/directorates/sgc/disability/studentinformation/supportavailable/>).

Please use this form to explain how your condition, personal situation or circumstances have impacted on your ability to adapt your research project or mitigate delays due to Covid-19.

The information provided in this form will be considered by the Institutional Assessment Panel. It will not be shared with your Supervisor, School or funding body.

Application Deadline 26 February 2021

Our Ref: Stage 3/ANP

\* Required

\* This form will record your name, please fill your name.

## Section 1

\*\*\*Please read Guidance before completing this section, which includes eligibility to be considered for funding\*\*\*

1. Student Number \*

The value must be a number

2. Surname \*

3. Name \*

4. Student QUB email address \*

*This is the address that will be used to contact you regarding the outcome(s) of your application.*

Sample

## Section 2

### ADDITIONAL NEEDS PRIORITIES

5. Please indicate whether you are funded by UKRI/Research Council and when your funding is due to end. Please select one option. \*

Further details about UKRI/Research Councils are at <https://www.ukri.org/councils/> (<https://www.ukri.org/councils/>).

- I am funded by UKRI and funding is due to end by 30 September 2021
- I am funded by UKRI and funding is due to end after 30 September 2021
- I am not funded by UKRI and my funding is due to end by 30 September 2021

6. Please confirm that you are eligible to be considered on a needs priority basis by indicating below all that apply. \*

- Long term condition / illness
- Disability
- Neurodivergent
- Caring Responsibilities

Sample

7. Please confirm if you are registered with Queen's University Belfast Disability Services

- Yes
- No

8. Supporting evidence is not required. If you feel that there is evidence which helps to demonstrate the additional challenges you have experienced due to Covid-19, e.g. your Student Support Agreement, please upload.

 Upload file

File number limit: 3 Single file size limit: 10MB Allowed file types: Word, PDF, Image

9. If applicable, please describe your caring responsibilities. Who do you care for, what was the caring arrangement before March 2020, and how did this change following Covid-19 lockdown from March 2020? Please indicate whether you are the sole carer, or if this is supported (e.g. by a spouse or relative).

*Please limit to 250 words.*

10. Please describe how your condition, personal situation or circumstances have impacted on your ability to adapt your research project, or put in place mitigations to support your research progression? \*

*Please limit to 250 words.*

# Sample

11. Signed \*

*By signing off this form you are confirming that the information is accurate. Please type your name below*

12. Dated \*



Format: M/d/yyyy

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# Sample