

Stage 5 QUB PGR Application for Funding-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 form can be completed by:

- any student who meets eligibility criteria for this round of funding and has completed a Stage 4 funding extension application OR
- students who have made previous case for funding (e.g. Stage 4) but not a Needs Priority Case,

who wishes to outline additional prioritisation under the 'needs prioritisation' criteria (i.e. disability, long-term condition, neurodivergence or caring responsibilities). See Appendix 2 of Guidance for details about what constitutes a disability or long-term condition.

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: 28 February 2022

Our Ref: Stage 5/ANP

* Required

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

PERSONAL DETAILS

*****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

ADDITIONAL NEEDS PRIORITIES

5. Please indicate when you submitted an application for a stipend extension due to CV19 impact *

Yes I have submitted an application for a stipend extension via Stage 5 (current process)

Yes I submitted an application for a stipend extension via Stage 4 (previous process)

I applied for extension funding from my funding body and wish to be considered on a Needs Priority basis for additional support. I will submit documents to pgawards@qub.ac.uk (<mailto:pgawards@qub.ac.uk>) that were provided to my funding body, along with their decision.

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

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.

You also have the option of giving permission for the Panel to access your Student Support Agreement from Disability Services - refer to next question.

 Upload file

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

9. Please confirm if you give permission for the Panel to access your Student Support Agreement from Disability Services.

- Yes I give permission for the Panel to access my Student Support Agreement from Disability Services
- No I do not give permission for the Panel to access my Student Support Agreement from Disability Services

10. If applicable, please describe your caring responsibilities.

The Panel is particularly looking for detail about who do your 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).

11. 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? *

The Panel is particularly looking for more detail about how your disability/long-term condition/illness/neurodivergence or caring responsibilities have increased the level of disruption, and resulted in additional challenges adapting your research.

This is not about providing a high volume of information (please limit to 250 words) – a few sentences or bullet points is sufficient – that provides a few examples or highlights more specifically challenges you have faced in addition to impacts on your research that have been experienced by many students.

12. Please confirm that you have also submitted a Stage 5 QUB PGR Application-Stipend Extension Due to CV19 Impact on Research 21/22. *

*Candidates who wish to be considered under needs priority must submit **both** a Needs Priority form and a Stage 5 QUB PGR Application-Stipend Extension Due to CV19 Impact on Research 21/22.*

I confirm that I have submitted a Stage 5 QUB PGR Application-Stipend Extension Due to CV19 Impact on Research 21/22.

13. Signed *

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

14. Dated *

Format: M/d/yyyy

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 Microsoft Forms

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