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| **Royce@Cambridge****SME Funding Application****FORM: [CAM-YR8-SME-000]** |  |

**Royce@Cambridge SME Equipment Access Funding**

The Henry Royce Institute has provided funding for SMEs to access to the Royce shared equipment facilities located at Cambridge. Royce@Cambridge invites applications up to **£10,000 commercial costs** for award of this equipment access funding. Applications that would exceed this amount must be discussed with Royce@Cambridge ( via **royce@maxwell.cam.ac.uk** ) before applying. The full list of eligible Royce Institute equipment is available at: <https://www.maxwell.cam.ac.uk/programmes/henry-royce-institute>

Proposals must be submitted using the attached form. The funding is available on a first-come-first-served basis until the funds are exhausted. **All projects must be completed by the 31st of March 2024.** This funding cannot cover projects already funded by other grants.

**Proposal Guidelines**

Applicants may submit a proposal using the attached form to **royce@maxwell.cam.ac.uk**. The following rules apply:

* Investigators can be from any UK SME.
* After completion of experiments, applicants are asked to provide a short paragraph of how the equipment was used, or link to any relevant publications (open access).
* All instrument usage that is funded by Royce must be acknowledged in publications using the grant code: **Cambridge Royce facilities grant EP/P024947/1 and Sir Henry Royce Institute - recurrent grant EP/R00661X/1**
* Royce cannot support travel costs or the costs of small consumables directly related to the project; these must be provided by other sources.
* All projects should be complete by the end of March 2024.

Supported activities are outlined below:

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| **Supported Activities** |
| Equipment Access(inc. Basic Training) | YES |
| Consumables | NO |
| Staff Costs | NO |
| Travel | NO |
| Accommodation | NO |

**Royce@Cambridge SME Funding Application: [CAM-YR8-SME-000]**

This form is to be completed by the applicant in conjunction with the relevant facilities staff. To submit please email this form to **royce@maxwell.cam.ac.uk** . The funding is available on a first-come-first-served basis until the funds are exhausted. This funding must be used by the 31st of March 2024.

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| **Applicant Information** |
| **Applicant Name:** |  |
| **Applicant Email:** |  |
| **Job Title:** |  |
| **Company Name:** |  |
| **Company Website:** |  |
| **Companies House Registration:** |  |
| **Company Address:** |  |
| Please confirm that you have attached a De Minimis declaration: | **YES/NO** |
| Please confirm that you are an SME: | **YES/NO** |

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| **Project Information** |
| **Project Title:** |  |
| **Royce Research Area:** |  |
| **Is this project confidential (Y/N):**  |  |
| Give a brief description (up to 250 words approx.) of the research question to be addressed using the Royce facility/facilities, why the Royce facilities requested are believed to be appropriate, and the proposed programme of work to be carried out: |
|  |
| Proposed impact/financial benefit of the project to your SME (e.g. increased turnover or employment): |
|  |
| What type of material are your samples comprised of and are there any hazards associated with them: |
|  |
| Where relevant, provide details (title, grant type, funder, reference number) of any associated, current research grant: |
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|  |  |
| Does sustainability underpin this project: | **YES/NO** |
| Have you benefitted from a Royce Access Scheme before?: | **YES/NO** |
| Is the proposed project intended to generate data for a specific funding call?: | **YES/NO** |
| If Yes, please provide details or a link to the call: |
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| **Facilities Required** |
| Equipment to be used: |  |
| Facility Contact(s): |  |
|  |
| **Equipment** | **Usage (Hrs/Days****/Sample)** | **SRF Cost (per unit)****[NO VAT]** | **Total** | **Commercial Cost****(per unit)** | **Total** | **\*VAT** |
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|  |  |  |  |  |  |  |
|  |  | **SRF** **Total:** |  |  | **Commercial Total:** |  |
|  |
| *Facility Manager(s) to confirm they have discussed the planned programme of work with the applicant and that it is believed to be appropriate:* |
|  |  |
| **Please confirm with an ‘X’** |  |
|  | The proposed methodology is appropriate to the research question being asked, has been discussed with the applicant, and any caveats or limitations on the data to be outputted have been explained. |
|  | Responsibility for sample preparation and disposal has been discussed and agreed. |
|  | Responsibility for completing all necessary risk assessments and COSHH documentation has been discussed and agreed. |
|  | Any issues of confidentiality associated with the work package and results/data expected to arise from carrying out the work have been discussed with the applicant and appropriate actions agreed. |
|  | The facility manager and applicant have agreed the costs involved. |
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| Estimated Start Date of Project: |  |
| Estimated End Date of Project: |  |
|  |  |
| Facility Manager:(Print Name and Date) |  |
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| **Applicant Declaration** |
|  | **Please confirm with an ‘X’**  |
| I confirm that any publications arising from this work at Cambridge will acknowledge the grant code: Cambridge Royce facilities grant EP/P024947/1 and Sir Henry Royce Institute - recurrent grant EP/R00661X/1 |  |
| I acknowledge that UK and US export control legislation may be applicable to the work you are undertaking in the Henry Royce Institute at the Royce Partner organisation. I agree to comply with all UK and US export control legislation and regulations and apply for any necessary export licence. I acknowledge that the Royce Partner organisation will not undertake any export control checks on your behalf nor be responsible for your compliance with UK or US export control legislation |  |
| I am content for the Royce Institute to contact me about further funding opportunities. |  |
| **I wish to apply for funding under the Royce Equipment Access Scheme & confirm that the information I have supplied is correct:** |
| **SIGNED (Applicant):*****Print Name*** |  |
| **DATE:** | *Click or tap to enter a date.* |

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| **OFFICE USE ONLY** |  |
| Status: | APPROVED/PENDING/REJECTED |
| Date: |  |
| Funding: |  |
| Contact: |  |