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|  | British Aphasiology Society Special Award (Jargon Aphasia) |

## Applicant Information

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| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | First | Last |  |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | Town/City | County | Postcode |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |
|  |  |  |  |
| BAS Membership No. |  | HCPC No. |  |

|  |  |
| --- | --- |
| Proposed Project Title: |  |

## Project Lay Summary

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| --- | --- |
| Please provide a lay summary of your proposed project related to jargon aphasia (Maximum 250 words): |  |

## Applicant Background

|  |  |
| --- | --- |
| Please tell us about your clinical interest in jargon aphasia and your motivation to apply for this funding. (Maximum 250 words): |  |

## Project Details

|  |  |
| --- | --- |
| Please provide details of your proposed project. This should include aims and expected outcomes; activities to be undertaken; expected beneficiaries; ethical issues and how they will be addressed; details of any academic/mentorship support; and justification of costings. (Max 1000 words) |  |

## Lasting Impact

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| --- | --- |
| How will this project create lasting impact for people with jargon aphasia and their families? (Max 250 words) |  |

## Project Dissemination

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| --- | --- |
| How do you plan to share the outcomes of this project with others? (Max 250 words) |  |

## Project Costings

Please provide a breakdown of proposed project costings. You may add rows as necessary. Please play attention to the funding guidance on acceptable use of the funds and note that the maximum award will be £5000.

|  |  |
| --- | --- |
| Costings/Details | Amount |
|  |  |
|  |  |
| Total: |  |

## References

Please list two professional references (must include one academic reference).

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Job Title: |  | Phone: |  |
| Address: |  | | |
| Email: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Job Title: |  | Phone: |  |
| Address: |  | | |
| Email: |  |  |  |