

Future of Compute External Review: Secondment and Funding Permissions Form

This form requires the signature of the applicant, the applicant's lead supervisor and, if relevant, the grant holder. This form should be completed and uploaded as part of the online application form. Where necessary electronic signatures (scanned copies, pasted into the relevant box are acceptable).

This section is to be completed by the applicant:	
I confirm that I am eligible to apply to this opportunity, the content of this application is correct and that I have sought the appropriate permissions from my lead supervisor to undertake this position.	
Full Name (please print):	
University email address:	
University ID number:	
School/Department/Faculty:	
PhD Title:	
PhD Registration Date:	Confirmation/Upgrade Date:
Signature:	Date:

This section is to be completed by the lead supervisor:	
I confirm that the information within this form is correct. If this application is successful, I give my permission for the above applicant to undertake a full-time, 6 month placement with DCMS.	
Name (please print):	
Signature:	Date:

This section is to be completed by the grant holder:	
I confirm that the above information is correct. I confirm that the funded studentship will continue throughout the secondment with DCMS and be extended by 6 months to accommodate the secondment.	
Name (please print):	
Authorising Body (eg. UKRI)	
Signature:	Date: