|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of College:** | **Name of Key Contact for this application:** | | | **Title:** |
|  |  | | |  |
| **Position in College:** | **Email address:** | | | |
|  |  | | | |
| **Name(s) of any other College(s) or other organisation(s) partnering you in this project** | | | | |
|  | | | | |
| **Title of proposed WPIF Project:** | | | | |
|  | | | | |
| **Total amount applied for** (NB a College may apply for no more than £50k in any one academic year)**:** | | **Number of Participants who will benefit from the project:** | | |
|  | |  | | |
| **Has your College received a WPIF award previously? (give date and amount of award)**  **How much was the award?** | | | | |
|  | | | | |
| **College:** | | | **Date:** | |
|  | | |  | |

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| **Project summary**  Please provide:   * a brief description of the project * an outline timetable and * a financial table with full costs which identifies which costs you are asking the WPIF to cover   **PLEASE ATTACH THIS COVERSHEET TO YOUR PROPOSAL** |

This form should be completed and returned to: administrator@newtontrust.cam.ac.uk