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### Collaborative Venture Fund Application Form

Before completing this form, please contact your School Business Development Manager (BDM) or the central Research & Enterprise BDM (ext. 2356) to discuss the scope of the project and the potential outcomes to help strengthen your application.

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| **Enter the name of the BDM you have discussed this with.**  |  |
| **Project Title:** |  |
| **Proposed Start Date:** | Click here to enter. | **Proposed Completion Date:** | Click here to enter a date. |
| **Lead Academic:** |  | **Email:** |  |
| **School:** | Choose an item. | **Main Phone:** |  |
| **Organisation & Contact Details** |
| **Organisation Name:** |  |
| **Address:** |  |
| **Organisation Type:** | Choose an item. | **Industry Sector:** | Choose an item. |
| **Contact Name:** |  |
| **Contact Job Title:** |  |
| **Contact Email:** |  | **Contact Phone:** |  |

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| **Project Details** |
| **Briefly describe the project and how it relates to the organisation above:** |
|  |
| **Potential Outcomes** |
| **Summarise how you anticipate the project to lead to further collaborative/commercial opportunities (non-RCUK funded) with this or other organisations:** |
| 1.  |
| 2. |
| 3. |
| 4. |
| **Project Costs & Funding** |
| **Description** | **Details** | **Costs (£)** |
| **Staff Time:** |  | £  |
| **Equipment/Consumables:** |  | £  |
| **Travel:** |  | £  |
| **Other (please Specify):** |  | £  |
|  | **Total Project Costs:** | £  |
|  | **Organisation Cash Contribution:** | £ |
|  | **School Contribution:** | £ |
|  | **CVF Contribution requested:** | £ |
| **School Cost Centre for CVF Contribution transfer:** |  |
| **Organisation In-Kind Contribution** |  |
| **Description** | **Details** | **Costs** |  |
| **Staff Time:** |  | £  |  |
| **Equipment:** |  | £  |  |
| **Travel:** |  | £  |  |
| **Other:** |  | £  |  |

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| **Authorisation** |
| **Lead Academic.**I agree that the work will be **completed within 3 months and feedback provided as required**.  |
| **(Signed)** |  **(Print Name)** | **(Date)**  |
| **Organisation Senior Employee (on behalf of the company)**I confirm that we will make the necessary financial (as appropriate) and management commitment to provide support and time for the project. We are willing to participate in feedback, publicity and a case study. We acknowledge that any equipment purchased for the project remains the property of the University of Huddersfield.Occasionally we’d like to send information to your company contact above, regarding our Services to Business, news and events that may be of interest. If you would like to receive this information, please check the box [ ]  |
| **(Signed)** |  **(Print Name and Job Title)**  | **(Date)**  |
| **School Head/Dean/Director**I confirm that the School will make the necessary financial (where appropriate) and management commitment. The name of your school BDM or nominee, (this should not be the Lead Academic), who will be responsible for obtaining feedback regarding this application is:   |
| **(Signed)** |  **(Print Name)** | **(Date)**  |