

The Dr Teresa Tiffert Research Innovation Awards

**Please complete all fields and return the form to** **fa351@cam.ac.uk****.**

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| --- | --- |
| Forename |  |
| Surname |  |
| CRSid |  |
| Subject |  |
| Tutor Email |  |
| Are you happy for your tutor to see this form |  |
| Study Year |  |
| HO/Overseas |  |

Financial Need (max. 250 words):

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Progress to date (max. 250 words):

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|  |

Proposed plan of work (max. 500 words):

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Potential impact on your career (max. 250 words):

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Name and email address of your Supervisor:

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| --- |
|  |

Name and contact details of potential referee:

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