



**TrusTECH[®] Service Innovation Bursary
Application Form (version 1.2)**

1. Name of innovation	
SECTION 1: APPLICANT	
Applicant (TrusTECH[®] member)	
2. Name (including title)	
3. Job title	
4. Organisation	
5. Department	
6. Address (including postcode)	
7. E-mail	
8. Telephone number	
9. Signature	
SECTION 2: INNOVATION SUMMARY	
10. What is the problem that the innovation addresses?	
11. What solutions to this problem already exist?	
12. How is the innovation an improvement over these solutions?	
13. How has the innovation worked within your Trust?	

TrusTECH[®] Service Innovation Bursary Application Form

14. Is the innovation of benefit to other NHS Trusts? *(please give details i.e. PCTs, Acute Trusts, Specialist).*

15. Progress to date *(please outline what work has been carried out so far on the innovation including any funding that has been received).*

16. Who was / is involved in developing and / or implementing the innovation? *(Please continue on a separate sheet if required).*

Name	Job title	Organisation

17. If no-one listed above is employed by a TrusTECH member, please detail the contribution of the member organisation below

18. Is income likely to be generated from this innovation? *(Please give details of how i.e. training manuals, charts etc)*

19. Is the application for funding to disseminate or evaluate a service?

TrusTECH[®] Service Innovation Bursary Application Form

20. If the application for funding is for an evaluation of the service, how will the innovation be disseminated if shown to be effective?

SECTION 3: JUSTIFICATION FOR FUNDING

21. If this application is successful, describe in detail how the funding will be used.

22. Please give details of any third parties who will be working with the applicants to develop the innovation and describe their proposed involvement.

23. Please indicate the total length of the project (e.g. 1 year).

24. Please give a detailed project plan with milestones.

25. Please give details of the funding (e.g. development of information manuals, project management, workshops) requested (please add additional rows if required).

Item	Details	Cost (£)

TrusTECH[®] Service Innovation Bursary Application Form

TOTAL		

SECTION 4: ORGANISATION SUPPORT

The below-signed agrees on behalf of his/her organisation to the terms and conditions of the TrusTECH Service Innovation Bursary Fund, as outlined in the application guidance and understands that a funding agreement will also need to be signed if this application is successful. In addition support will be given for the innovator's continued involvement in disseminating the information relating to the Service Innovation to other NHS organisations.

Signature on behalf of TrusTECH member NHS Assistant Director (or above)

Name <i>(including title)</i>	
Position	
Organisation	
Signature	
Date	

Notes on completing application form

1. Please type your answers into the relevant cells of the table.
2. You are not restricted to the space available on the blank application form: if you type more text, the relevant cell will expand accordingly. Similarly, if you need more rows (e.g. for the details of funding required) please add them to the table.
3. Please do not submit this application form without consulting with the TrusTECH[®] Service Innovation Manager.
4. For further information on the application process, please refer to the TrusTECH[®] Service Innovation Bursary Application Guidance.

© 2005 Central Manchester and Manchester Children's University Hospitals NHS Trust. All rights reserved. Not to be reproduced in whole or in part without the permission of the copyright owner.