UKRI Mental Health Platform

ECR Fellowships application form

**Please consult the** [**MHP website**](https://www.mentalhealthplatform.ac.uk/)**, the ECR Fellowships Review Process and Scoring criteria** [**ECR Fellowships Webpage**](https://www.mentalhealthplatform.ac.uk/ecr-fellowships) **and the** [**MHP Privacy Policy**](https://www.mentalhealthplatform.ac.uk/privacy-policy) **before submitting your application.**

# Part I – Applicant details

|  |  |
| --- | --- |
| Title | Click or tap here to enter text. |
| First Name | Click or tap here to enter text. |
| Last Name | Click or tap here to enter text. |
| ORCID ID | Click or tap here to enter text. |
| Current role | Click or tap here to enter text. |
| Organisation name | Click or tap here to enter text. |
| Department | Click or tap here to enter text. |
| Email contact | Click or tap here to enter text. |
| Tel. contact | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |

**Collaborators**

ECR fellows are not required to have collaborators. Please see the Additional Information section on the [ECR Fellowships webpage](https://www.mentalhealthplatform.ac.uk/ecr-fellowships). If applicable to the project, please provide the following details for each one of them, and copy and paste this section if listing more than one collaborator:

|  |  |
| --- | --- |
| Title | Click or tap here to enter text. |
| First Name | Click or tap here to enter text. |
| Last Name | Click or tap here to enter text. |
| ORCID ID | Click or tap here to enter text. |
| Current role | Click or tap here to enter text. |
| Organisation name | Click or tap here to enter text. |
| Department | Click or tap here to enter text. |
| Email contact | Click or tap here to enter text. |
| Tel. contact | Click or tap here to enter text. |
| Address | Click or tap here to enter text. |

**Please ensure that each collaborator submits a letter of support (maximum 2 pages), confirming their involvement and consenting to the processing of their data as outlined in the** [**MHP Privacy Policy**](https://www.mentalhealthplatform.ac.uk/privacy-policy)**.**

# Part II– Project information

|  |  |
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| Project Title | Click or tap here to enter text. |
| Start Date | Click or tap here to enter text. |
| End Date, Length | Click or tap here to enter text. |
| 100% FEC | Click or tap here to enter text.Click or tap here to enter text. |
| 80% FEC (Proposed cost to funder) | Click or tap here to enter text. |
| Please indicate the name of your host institution if your application is successful | Click or tap here to enter text. |
| Please indicate the time you are committing to this fellowship (as a percentage) | Click or tap here to enter text. |
| Please indicate if you are resubmitting an application. If yes, you will need to provide details of the changes in a 1 page document attached to your application. | Yes  No |

**[Plain language summary](https://www.journalslibrary.nihr.ac.uk/information-for-authors/manuscript-preparation/report-sections/plain-language-summary" \l ":~:text=You%20should%20provide%20a%20plain%20language%20summary%20of,with%20the%20NIHR%20Journals%20Library%E2%80%99s%20commitment%20to%20accessibility.)** [**c**](https://www.journalslibrary.nihr.ac.uk/information-for-authors/manuscript-preparation/report-sections/plain-language-summary#:~:text=You%20should%20provide%20a%20plain%20language%20summary%20of,with%20the%20NIHR%20Journals%20Library%E2%80%99s%20commitment%20to%20accessibility.)**ontaining:**

* The context of the aims and objectives of the research
* Potential applications and benefits

If successful, this summary will appear on our website. By submitting this application, you confirm that your lay summary does not contain any confidential or sensitive information and may be shared with the MRC and uploaded to the UK Research Gateway.

(< 300 words)

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| Click or tap here to enter text. |

**If applicable, please provide details of proposed co-funding and/or contributions from other academic institutions, industry or other organisation(s) to your project** (<300 words)

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| Click or tap here to enter text. |

**If you have an Industry partner , please indicate if your application requires to be submitted under th[e](https://www.ukri.org/councils/mrc/guidance-for-applicants/types-of-funding-we-offer/mrc-industry-collaboration-framework-icf/)** [**MRC Industry Collaboration Framework (ICF)**](https://www.ukri.org/councils/mrc/guidance-for-applicants/types-of-funding-we-offer/mrc-industry-collaboration-framework-icf/)

Please consult the guidance on th[e ECR Fellowships webpage a](https://www.mentalhealthplatform.ac.uk/ecr-fellowships)bout collaborators, for more information.

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| Click or tap here to enter text. |

**Which Hubs will be involved in your project?**

Brain and Genomics

Complex Emotions

DATAMIND

ImmunoMIND

Metabolic Psychiatry

Social Health

**Please confirm you have discussed your application with the leaders of [the](https://www.mentalhealthplatform.ac.uk/about/people)** [**Hubs s**](https://www.mentalhealthplatform.ac.uk/about/people)**elected and they support your application.** Please provide further details, if necessary.

Yes, I discussed my application with all the Hub PIs involved and they support my application

No

**Applicants are required to have one co-supervisor from each Hub involved in the project.** Please confirm your lead and co-supervisor(s), as well as their email addresses, Hubs and institutions.

**Lead Co-supervisor:** Click or tap here to enter text.

Email: Click or tap here to enter text.

Hub: Click or tap here to enter text.

Institution: Click or tap here to enter text.

**Co-supervisor(s):** Click or tap here to enter text.

Email: Click or tap here to enter text.

Hub: Click or tap here to enter text.

Institution: Click or tap here to enter text.

**Were PPIE members involved in the design of your application?**

If yes, please include in the PPIE plan (Part III- Appendices), how PPIE members contributed to the proposal, who was involved, why and if/how they will be involved in the future, if your application is successful

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| Click or tap here to enter text. |

**Impact Statement**: Please explain the value and impact of your research study to people with SMI, outlining measurable outcomes that will contribute to scientific progress, health and/or social care (< 300 words)

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| Click or tap here to enter text. |

**Diversity statement**: Please describe how you have considered Equality, Diversity, and Inclusion (EDI) principles in your application.

For further guidance: [Embedding diversity in research design – MRC – UKRI](https://www.ukri.org/who-we-are/mrc/our-policies-and-standards/embedding-diversity-in-research-design/)

(< 300 words)

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| Click or tap here to enter text. |

**What are the ethical implications related to the proposed work? If you do not think that the proposed work raises any ethical issues, explain why**

Applicants must comply with all relevant regulatory, policy and ethical requirements. We expect all applicants to obtain ethical approval for their projects, unless the work is already covered by an existent approval. For further guidance[: Ethics and approvals – UKRI](https://www.ukri.org/publications/mrc-guidance-for-applicants/ethics-and-approvals/)

(< 300 words)

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| Click or tap here to enter text. |

**Please declare if you are aware of any reason why any individual on the MHP Hubs or [Leadership Team](https://www.mentalhealthplatform.ac.uk/about/people)** [**s**](https://www.mentalhealthplatform.ac.uk/about/people)**hould not review this proposal.**

All reviewers are expected to declare any potential conflict of interests when they are invited to be part of the Committees. If a conflict of interest is identified during the review process, the reviewer must withdraw immediately from reviewing the application.

However, we also ask applicants to identify during the application stage any potential conflicts of interest with Collaborators, Hub leads, PPIE other members of the platform.

* Reviewers will be excluded from reviewing an application if they have:
  + Direct involvement in the proposed project (e.g. co-supervisor, collaborator)
  + Close professional relationship (e.g. collaborator, supervisor. mentor or co-applicant with the main applicant in other projects
  + Employment at either the current or proposed host institution
  + Personal or financial interest in the outcomes of the application

Please consult ECR Fellowships Review Process and Scoring criteria on th[e ECR Fellowships webpage,](https://www.mentalhealthplatform.ac.uk/ecr-fellowships) for information on how we manage potential conflict of interest during the review process

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| Click or tap here to enter text. |

**Please include here any other information or feedback you would like to share with us.**

We are committed to ensuring an inclusive and accessible application process. Please let us know if you require any accessibility adjustments to support you during the selection process

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| Click or tap here to enter text. |

# Part III – Appendices

All required documents listed in Part III should be merged and submitted as a single PDF file.

Please include in appendix the following documents with your information:

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| --- | --- | --- |
|  | **Documents** | **Max length**  (A4, Arial, font size 11) |
|  | Cover letter | 2 pages |
|  | CV ([in UKRI format](https://www.ukri.org/publications/mrc-fellowships-cv-template-2021/)) | 2 pages |
|  | List of selected publications | 1 page |
|  | Letter of support from host Institution | 2 pages |
|  | Letter or email of support from Hub leads | 1 page each |
|  | Letter or email of support from supervisors | 1 page each |
|  | Research Plan | 4 pages |
|  | Budget plan | 1 page |
|  | Patient and Public Involvement and Engagement plan | 1 page |
|  | Personal Development plan | 1 page |
| **If applicable:** | | |
|  | Collaborators CV ([in UKRI format](https://www.ukri.org/publications/mrc-fellowships-cv-template-2021/)) | 2 pages |
|  | Collaborators list of publications | 1 page |
|  | Collaborators letter of support | 2 pages |
|  | Industry Partner [letter of support](https://www.ukri.org/publications/mrc-industry-collaboration-framework-additional-documents/), for applications submitted under the MRC Industry Collaboration Framework (ICF). | 2 pages |
|  | Resubmission justification | 1 page |

**For more information or guidance on the documents listed please consult ECR Fellowships Review Process and Scoring criteria and the Additional Information on th[e](https://www.mentalhealthplatform.ac.uk/ecr-fellowships)** [**ECR Fellowships webpage.**](https://www.mentalhealthplatform.ac.uk/ecr-fellowships) **Please keep the total size of all documents under 25Mb.**

# Part IV- Diversity Information (Optional)

We are committed to finding ways to improve inclusion in severe mental illness research, to identifying and minimising barriers to progression for researchers with diverse characteristics and backgrounds, and to ensuring our work is representative of those we support. The Diversity Data we collect is important for us to monitor our progress against these commitments. Please read the [MHP Privacy Policy](https://www.mentalhealthplatform.ac.uk/privacy-policy).

**Providing Diversity Data is entirely optional. We will not use your Diversity Data during the application review process to make decisions about you.**

We are collecting the following Diversity Data:

**1. What is your age?**

Up to and including 24 years

25-34 years

35-44 years

45-54 years

55-64 years

65-74 years

75+ years

Prefer not to say

**2. Which of the following best describes your gender?**

Man

Non-binary

Woman

Prefer to self-describe

Prefer not to say

**3. What is your ethnic group? Please select all the options that best describe your ethnicity or background E.g. you could select Black African and White British if this best reflects your identity.**

**Asian / Asian British**

Bangladeshi

Chinese

Indian

Pakistani

Any other Asian background, *please describe below*

**Black / African / Caribbean / Black British**

African

Caribbean

Any other Black / African / Caribbean background, *please describe below*

**White**

English / Welsh / Scottish / Northern Irish / British

Gypsy or Irish Traveller

Irish

Roma

Any other White background, *please describe below*

**Any other ethnic group**

Arab

Hispanic

Latina/Latino/Latinx

Any other ethnic group, *please describe below*

Any other Mixed / Multiple ethnic background, *please describe below*

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| Click or tap here to enter text. |

**Prefer not to say**

**4. Do you consider yourself to have a disability or long-term condition?**  
(such as dyslexia, diabetes, arthritis, a heart condition, or a mental health condition)

Yes

No

Prefer not to say

**4a. Do you experience barriers or limitations in your day-to-day activities related to any health conditions (including mental health), physical, sensory or cognitive differences?**

Yes – substantial barriers or limitations

Yes – some/small barriers or limitations

No

Prefer not to say

**4b. If yes, you may describe in the box below what type of barriers or limitations you face. Please describe these in whatever way works for you, some examples are included below. Please do not include any identifying information.**

*For example, these might include:*

* *Attitudinal barriers e.g. discriminatory attitudes; negative or incorrect assumptions*
* *Physical barriers e.g. no step free access to buildings; physical expectations of participating*
* *Travel or transportation barriers e.g. lack of accessible transport and accommodation*
* *Communications barriers e.g. lack of information in different accessible formats; lack of BSL interpretation*

|  |
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| Click or tap here to enter text. |

6. Do you have any caring responsibilities?

None

Primary carer of a child or children (under 18)

Joint primary carer of a child or children (under 18)

Primary carer of a disabled child or children

Primary carer or assistant for a disabled adult (18 years or over)

Primary carer or assistant for an older person or people (65 and over)

Secondary carer (another person carries out the main caring role)

I have caring responsibilities but prefer not to specify what these are

Prefer not to say

# Part V – How did you find out about this opportunity?

We would like to understand how you heard about this opportunity to help improve our outreach efforts. Please select all that apply:

University or academic department communication (e.g. email newsletter, website)

UKRI website

Social media (e.g., LinkedIn, Twitter/X, Instagram)

Email newsletter or mailing list

Another Organisation’s website

Colleague or word of mouth

Conference, network or professional event

Poster, flyer or physical advertisement

Other (please specify): Click or tap here to enter text.

# Part VI – Consent

In order to process your application, we need your consent to be contacted and to use and store the data you have provided. Your data will be stored securely, according to the [MHP Privacy policy](https://www.mentalhealthplatform.ac.uk/privacy-policy), and you have the right to access your data and to withdraw your consent, at any time by emailing the MHP Coordinating Team at [mhp@ed.ac.uk](mailto:mhp@ed.ac.uk).

**I consent to be contacted by the MHP, and for them to process and store the data I've provided, according to the** [**MHP Privacy policy**](https://www.mentalhealthplatform.ac.uk/privacy-policy)**.**

# What’s next?

Once the document is completed and you confirm your consent, please save your application form with the title **YYYY\_MHP\_ECRFellowship\_firstname\_surname** and submit as single pdf it to mhp@ed.ac.uk with the subject line “**MHP ECR Fellowship application**” and your name. Please submit all appendices listed in Part III with your application form in the order they are listed in the table. Your name should be included in all document titles.

**If you are resubmitting an application** from a previous round, you must demonstrate substantial changes and provide a 1-page explanation outlining how the revised version addresses any prior review panel feedback. Include this with your submission as an appendix.

The MHP Coordinating Team will process your application to confirm all information has been provided and will send you an email confirming receipt. Only complete applications will be reviewed by the ECR Review Committee.

For information on estimated timelines, please consult the ECR Fellowships Review Process and Scoring criteria on th[e ECR Fellowships webpage.](https://www.mentalhealthplatform.ac.uk/ecr-fellowships)

The outcome of your application will be shared with you no later than six months after the submission date.

If your application is successful, you will receive a unique link to upload your information to the UKRI Funding Service and you will then receive an award letter from the MRC UKRI, with the fellowship terms and conditions. The award letter will also be shared with your host HEI.

Successful applicants will be invited to be part of the MHP and are expected to follow th[e MHP values a](https://www.mentalhealthplatform.ac.uk/our-values)n[d Data Sharing principles.](https://www.mentalhealthplatform.ac.uk/data-sharing-policy) The summaries of all funded projects will be uploaded to the MHP website.

All decisions are final and there is no right to appeal. Unsuccessful candidates will be allowed to re-apply one more time in one of the following recruitment rounds. Unsuccessful candidates must make substantial changes to their previous application and specify how they have addressed any comments from the review panel.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Edited by** | **Version** | **Description** | **Next review due** |
| 2025-01-31 | DG | 1 | New document | N/A |
| 2025-02-27 | DG | 2 | *The question in Part II regarding the applicant’s lead and co-supervisors has been revised to request additional information about each supervisor’s Hub and institution.* | N/A |
| 2025-07-18-MM-DD | CT | 3 | Part II: Updated to request additional details for each supervisor, including their affiliated Hub and institution.  Part III: Corrected typos in the appendices list. Clarified that a 1-page justification must be included when resubmitting an application. Updated formatting of the appendices checklist table.  Minor formatting and wording changes. | N/A |