A close-up of a logo

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**John Innes Foundation Grant Application Form**

See guidance notes for help and tips.

**Section A: Project/Initiative Details**

1. **Project/Initiative Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Grant Purpose** *(Max 200 words)*:

|  |
| --- |
| **Provide a brief description of the project including the specific need or problem it addresses.** |
|  |

1. **Key Innovation** (*Max 150 words)*:

|  |
| --- |
| **Describe the unique or innovative aspects of the proposed project. How does it stand out from existing initiatives in the field?** |
|  |

1. **Objectives**: *(Max 200 words)*

|  |
| --- |
| **Clearly outline the specific objectives of the project or initiative.** |
|  |

1. **Team and Resources** *(Max 200 words)*

|  |
| --- |
| **Provide evidence that your team has the necessary skills, expertise, and resources to deliver the project successfully.** |
|  |

1. **Project Management** *(Max 150 words)*

|  |
| --- |
| **Outline your approach to project management, including how you will monitor progress.** |
|  |

1. **Duration**:
   * Proposed project start date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Planned end date (max length 5 years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Risks and Mitigation Strategies** *(Max 150 words)*

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| --- |
| **Identify potential risks to the completion of your project and describe how these risks will be managed.** |
|  |

1. **What would be the impact of not receiving this grant?** *(Max 150 words)*

|  |
| --- |
| **If the grant is not awarded, how this would impact the project. Will it go ahead in any capacity?** |
|  |

**Section B: Additional Questions for Research and Enterprise Focused Applications**: *(Complete if applicable)*

1. **Research Benefits**: *(Max 200 words)*:

|  |
| --- |
| **How will your project benefit the field of research?** |
|  |

1. **Collaboration**:  
   Does your project involve collaboration with industry or other institutes/companies on the Norwich Research Park? (Yes/No)
   * If yes, provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Commercialisation**: *(Max 200 words)*

|  |
| --- |
| **Do you currently have plans to commercialise the outputs of this project?** |
|  |

1. **Focus Areas**:  
   Does your project have a specific focus on any of the following areas? *(Cross all that apply)*:
   * Soil
   * Soil Microbiome
   * Plant Health
   * Disease Resistance
   * Crop Nutrition
   * AI and Engineering Biology
   * Tools and technology underpinning biological research
   * Other – please specify:

**Section C: Financial Information**

1. **Grant Amount Requested**: Use the table below to explain how the requested amount fits into the overall budget

|  |  |
| --- | --- |
| Total cost of the project or initiative |  |
| **Financial contribution from other sources**  (Specify whether confirmed or potential and name of source(s)) |  |
| **In-kind contribution from other sources**  (Specify whether confirmed or potential and name of source(s), with equivalent value if possible) |  |
| **Total requested from the**  **John Innes Foundation** |  |

1. **Budget Breakdown** *(Attach supporting document if necessary)*:

|  |  |  |
| --- | --- | --- |
| **Activity/Milestone** | **Cost** | **Detail/Brief Justification** |
|  |  |  |
|  |  |  |

1. **Cost Phasing**:

Outline when you anticipate funds will be required and propose a detailed schedule for invoicing.

For example:

* + All at once at the start of the project.
  + In stages (e.g., milestones or phases – please specify).
  + If the project spans multiple years, indicate how much funding is requested for each year and when this will be requested.

|  |
| --- |
|  |

**Section D: Impact and Sustainability**

1. **Expected Impact:** *(Max 250 words)*

|  |
| --- |
| **Describe the intended project outcomes, including estimated number of beneficiaries and target audience (where appropriate).** |
|  |

1. **Knowledge Exchange:** *(Max 150 words)*

|  |
| --- |
| **Outline how you will share and apply the outcomes of your project with stakeholders.** |
|  |

1. **Legacy and Sustainability**: *(Max 150 words)*:

|  |
| --- |
| **How will the benefits of this project be sustained after funding ends?** |
|  |

**Section E: Supporting Documentation** *– limited to 3 pages of A4*

1. **Optional additional attachments can include**:

* Project plan or timeline
* Letters of support from partners or collaborators
* Detailed budget
* Evidence of impact from previous related projects

Combine into one file and use the naming convention ‘JIF\_[ProjectTitle]\_Supporting \_Documents.pdf’

1. **Is there anything else you wish to mention to support your application that has not been covered in previous sections?** *(Max 200 words)*

This is your opportunity to provide any additional information that you feel is relevant to your application but has not been addressed in the earlier sections. For example, additional context about your organisation or project. Challenges you anticipate and how you plan to address them. Any unique aspects of your proposal that demonstrates its importance or potential impact.

|  |
| --- |
|  |

**Section F: Applicant Information**

1. **Contact Information**:

|  |  |
| --- | --- |
| **Name of Applying Organisation** |  |
| **Organisation Website** (if applicable) |  |
| **Name of Lead Applicant** |  |
| **Role/Position** |  |
| **Email** |  |
| **Address** |  |
| **Phone** |  |
| **Co-Applicants** (Name, organisation, role on project) |  |
| **Contact Details for Invoicing** (name, email address) |  |

1. **Grant Category** *(Select one)*: See guidance notes for help on selecting the most appropriate category for your application.
   * Education
   * Research
   * Enterprise
   * Other (Including rare books and JIF historical collection)
2. **Previous Funding** *(Max 150 words)*:

|  |
| --- |
| **If you have previously applied for funding for this project but were not successful, summarise what has changed since your last application that makes this project more likely to succeed?** |
|  |

**Section G: Declaration**

1. **Conflict of Interest Declaration**

Do you know any of the board of Trustees in a personal or professional capacity (other than through your interactions with JIF?): **Yes/No** (*delete as appropriate*)

* If yes, provide brief details and how this conflict will be managed (e.g., “Previously worked together at XY company,” or “Personal acquaintance…”). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Applicant Declaration**:

* I confirm that the information provided in this application is accurate and complete.
* I understand that any awarded funds must be used solely for the purposes outlined in this application.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (lead Applicant)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicants should ensure that this application form is completed in full prior to submitting via email to [clerk@johninnesfoundation.org.uk](mailto:clerk@johninnesfoundation.org.uk). Please Include 'JIF Grant Application – [Project Title]' in the subject line of your email and name the file ‘JIF\_Grant\_Application\_[ProjectTitle].pdf’

**Bank Account Form**

# **PLEASE PRINT IN BLOCK CAPITALS OR COMPLETE DIGITALLY**

**ORGANISATION DETAILS**

|  |  |
| --- | --- |
| Organisation Name |  |
| Address |  |
| Post Code |  |
| Email *(notification of payment will be sent)* |  |

**BANK DETAILS**

|  |  |
| --- | --- |
| Bank Name |  |
| Bank Address |  |
| Bank Post Code |  |

**ACCOUNT DETAILS**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Account Name *(in full)* |  | | | | | | | |
| Sort Code *(must be 6 digits)* |  |  | **-** |  |  | **-** |  |  |
| Account Number *(must be 8 digits)* |  |  |  |  |  |  |  |  |

**DECLARATION**

***By signing below, I declare that the information I have provided is correct and that I have included the authorised bank details associated with the organisation mentioned above.***

|  |  |
| --- | --- |
| Signature: | Date: |
| Full Name |  |
| Position |  |
| Telephone No. |  |