**LSSI CRoSS Early-Stage Commercialisation Funding Application Form**

**Application form to be no longer than 3 pages in total (form 1 page max, plus an additional financial table, and completed Business Model Canvas).** Please use font size 11 and do not amend margins throughout the application.

**Please return completed applications to** [**lssi@leeds.ac.uk**](mailto:lssi@leeds.ac.uk) **by 17.00 GMT on 10th July 2024**

|  |  |
| --- | --- |
| Project Title |  |
| Lead PI [Lead PI name and school/faculty] |  |
| Faculty Research Manager [Insert FRIO responsible for budget] |  |
| Requested Budget [amount in £] |  |
| Proposed start date | Proposed end date |
| 1. *(You may remove explanatory text in italics to create space) Briefly outline your work plan and show how this aligns with the criteria described above. You may find it useful to outline your proposed project by answering the following questions, but you do not have to use them:*   * *What is the fundamental research that informs this idea?* * *What can be the societal impact of this project?* * *How do you envision the project be developed?* * *Have you identified the background and potential foreground IP to be commercialised? Have you an agreement in place?* * *Who will you work with, who is your external partner?* * *How will the idea/innovation be sustained? (see the Business Model Canvases)* | |
|  | |

Please complete the justification of resources below, delete any unnecessary rows:

|  |  |
| --- | --- |
| Items | Costs £ |
| Travel and Subsistence: please itemise each journey, state the number of days and applicable subsistence rate claimed for each intended location and identify who incurs the costs. |  |
|  |  |
| Consumables: please state item(s) and quantity |  |
|  |  |
| Any other eligible costs: please specify |  |
| In-kind support from Faculty/School |  |
|  |  |

Total funds sought from CRoSS funding (do not include the in-kind support): £\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant signature: …………………………………… Date ………………………

Faculty Finance Manager Signature: …………………………………… Date ………………………