**Appendix A: MAPS Caring Fund application form**

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| **MAPS Caring Fund application form 2019/2020** |
| **Name of applicant, department and date of application**: |
| **Details of event (e.g. conference) for which funds are sought (name, dates, location):** |
| **What will the funds be used for?** e.g. *Extended hours for a child-minder or care worker to cover time when arriving home later than normal; Babysitter costs; Travel expenses for**friends or relatives to come to you to look after dependents; After school activities, clubs or play-schemes. Other (please specify).* |
| **Funds requested, including breakdown of total cost into the categories above**: |
| **Have provision of funds been sought from other providers** e.g. RCUK, London Mathematical Society, IoP, where relevant? If so, please specify amount. |
| **Line Manager Approval** (name, signature, date): |
| **Head of Department Approval** (name, signature, date): |
| **Note: If funding is approved a maximum 200 word report is to be submitted to the fund** **maps.caring@ucl.ac.uk** |
| **For the panel use only: Successful Unsuccessful**  |
| **Approved Funds (in GPB £):** |
| **Signature of Panel Chair (name and date):** |
| **Notes:**  |