**Caring responsibilities application form**

Students in receipt of a funding award may apply for the costs of additional caring responsibilities, including childcare, beyond that required to meet the usual necessities of your studentship and which are directly related to the project, where this is required in order for you to participate.

Costs associated with your normal working patterns may not be sought, ie. Monday – Friday, 9am-5pm.

Please note, your supervisor should support this application and approval from the Doctoral School sought via this application form *prior* to any additional expenditure being made.

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| --- | --- |
| **Student name** |  |
| **Student ID number** |  |
| **Supervisor name** |  |
| **Funder** |  |

|  |
| --- |
| **Description of event / training course to be attended and how related to your project:** |

|  |  |
| --- | --- |
| **Date/s of event** |  |
| **Time** |  |
| **Duration** |  |
| **Location** |  |

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| **Description of caring responsibilities preventing attendance and proposed solution:** |

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| **Additional costs required:** |

Please return your completed form, **copying in your supervisor**, to:

[Doctoral School, Recruitment & Scholarships team](mailto:DoctoralSchool@royalholloway.ac.uk)