

**INSIGHT Programme North West**

**Inspiring People into Research**

**Research Masters Degree Studentship Application form**

**Round 2, 2025**

You may wish to consult our [Frequently Asked Questions](https://arc-nwc.nihr.ac.uk/insight-studentships-frequently-asked-questions/)

to inform completion of your application

# Section 1: Eligibility Declaration

Applicants must complete the below Eligibility Declaration Statements.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Please check either statement 1 or statement 2 to declare that you are at an “early career” stage**  **Please note, for those who are internationally educated, years of practice must be calculated from the date of qualification/registration in your home country.** | | | | |
| 1 | I declare that I meet the eligibility criteria defining “early career” because:   1. I will be a recent graduate (2025) 2. I have been working in practice for no more than 5 years (since 2020) | | |  |
| 2 | I declare that I have been working in practice for more than 5 years, but there are circumstances (such as a career break, or time out for caring responsibilities) that justify my eligibility under the definition of “early career” | | |  |
| **If you have checked Eligibility Declaration Statement 1 (EDS1) please continue to EDS3.**  **If you have checked EDS2, please provide further detail justifying your eligibility.** | | | | |
|  | | | | |
| **I have discussed the circumstances described above with the INSIGHT Programme North West Team and been advised that I am eligible** | | | Choose an item. | |
| 3 | I declare that I am registered, or working towards registration, with one of the Regulatory Bodies listed in [Appendix 1](#_Appendix_1:_Eligible) | | |  |
| 4 | Please enter the Regulatory Body with which you are/will be registered | Choose an item. | | |
| Please enter the date you registered (if applicable) |  | | |
| 5 | I declare that I meet the entry requirements for the Master’s course (see [website(s)](https://arc-nwc.nihr.ac.uk/insight/insight-northwest-region-masters-courses/)) | | |  |
| 6 | I understand that course fees are payable at UK/Home student rates only. International rates are not payable via this programme. | | |  |
| 7 | I understand that, if successful, working hours must be reduced whilst in receipt of the INSIGHT studentship (Full-time 0.2FTE (1 day); Part-time 0.6 FTE (3 days)) | | |  |

**Applications without completed eligibility declaration statements will not be considered.**

# Section 2: Studentship details

|  |  |  |  |
| --- | --- | --- | --- |
| **Mode of study** | | | |
| Choose an item... | | | |
| **Please note: Part-time students are required to have written support from their employer/line manager to enrol on the course and complete any necessary requirements of study.** | | | |
| **Line Manager Support** | | Choose an item... | |
| **Please check to confirm you understand line management approval is a pre-requisite of part-time study** | | |  |
| **Stipend payment option** | | Choose an item. | |
| **Please check to confirm your employer supports the “Salary Contribution” payment option** | | |  |
| **Research Master’s Degree for which you wish to study** | | | |
| **Course** | Choose an item... | | |
| **Please tell us how you heard about the NIHR INSIGHT Programme North West** | | | |
|  | | | |

# Section 3: Personal details

|  |  |
| --- | --- |
| **First name(s)** |  |
| **Last name** |  |
| **Previous last name (if applicable)** |  |
| **Home address** |  |
| **Term time address (if applicable)** |  |
| **Post code** |  |
| **Contact e-mail address** |  |
| **Contact telephone number** |  |
| **Country of permanent residence** |  |
| **Country of birth** |  |
| **If born outside the UK, date of first entry to live in the UK** |  |
| **ORCID ID (**[**if any**](https://orcid.org/)**)** |  |
|  |  |

# Section 4: Academic details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First (or Undergraduate) Degree:**  **NB: If you are graduating this year, please provide your predicted grade** | | | | | | |
| **Institution** | **Full Award Title** | **Start date** | **End date** | | | **Grade** |
|  |  |  |  | | |  |
| **Postgraduate Qualifications (if any)** | | | | | | |
| **Institution** | **Full Award Title** | **Start date** | **End date** | | | **Grade** |
|  |  |  |  | | |  |
|  |  |  |  | | |  |
| **Professional Qualifications (if any)** | | | | | | |
| **Institution** | **Full Award Title** | **Start date** | **End date** | | | **Grade** |
|  |  |  |  | | |  |
|  |  |  |  | | |  |
|  |  |  |  | | |  |
| **English Language Qualifications**  If your first language is not English, please state which qualifications (e.g., IELTS, TOEFL) in English Language you hold or are currently studying, the score or grade if known and date taken. Please attach a photocopy of transcript and certificate if available. | | | | | | |
| **Type of Qualification** | | **Month** | | **Year** | **Grade** | |
|  | |  | |  |  | |

# Section 5: Employment details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Present employer (if any)** | | | | |
| **Employer name** | |  | | |
| **Employer address** | |  | | |
| **Role/Job title** | |  | | |
| **Band (if applicable)** | |  | | |
| **Professional background** | | Choose an item. | | |
| **Professional background detail** | | Choose an item. | | |
| **Full-time/Part-time (FT/PT)** | |  | | |
| **Employment start date** | |  | | |
| **Previous Employers (if any)** | | | | |
| **Employer** | **Role/Job title** | | **FT/PT** | **Dates (from-to)** |
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# Section 6: Supporting statement

|  |  |
| --- | --- |
| **Please state here your reasons for wishing to pursue a Research Masters Degree Studentship and give any details of any other relevant skills, achievements or experience in support of your application.**  **If you are applying for the Master of Public Health Course at the University of Liverpool, please discuss how your work experience - including paid jobs, voluntary posts, internships, etc.- is relevant to public health and what attracted you to the MPH at UoL.**  **(MAX 1000 Words)** | |
|  | |
| Please provide the final word count |  |

# Section 7: Previous applications

|  |
| --- |
| Please give details (with dates) of any previous applications to study for a higher degree at any of the four NIHR INSIGHT NW HEIs (UCLan, Manchester, Liverpool and Lancaster) |
|  |

# Section 8: References

|  |  |
| --- | --- |
| **Please note, a condition of the studentship offer will be the provision of two references.**  Upon completion of the INSIGHT selection process, your chosen host University will complete their internal enrolment processes, at which stage you will be asked to provide the details of two referees. Your referees should be able to comment on your character, academic ability, and your suitability for research work.  Please bear this in mind, and you may wish to contact your referees directly to secure references to support the enrolment process. | |
| **Please check to confirm you understand the requirement of two referees for course enrolment** |  |

# Section 9: Course alternative choice

|  |  |  |  |
| --- | --- | --- | --- |
| The INSIGHT award is highly competitive, and you may not be offered a place at your preferred/first choice Higher Education Institution (HEI). However, the interview panel may still deem you appointable to the programme. In these circumstances, we will endeavour to offer you a place at an alternative institution.  In the first instance we will   1. Aim to offer you a place on your second choice HEI and course if listed below 2. Offer a place at another HEI   Please provide your second choice of HEI and course.  **NB. If your first choice of course is at the University of Manchester, select an alternative HEI/Course** | | | |
| **HEI** | Choose an item... | **Course** | Choose an item... |

# Section 10: Declarations

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant to complete** | | | |
| I confirm that the information given on this form is true, complete and accurate and no information requested, or other significant material information has been omitted. | | | |
| **Signature** |  | **Date** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Line manager to complete** | | | |
| I support this NIHR INSIGHT Programme North West Masters in Research application | | | |
| **Signature** |  | **Date** |  |
| *When the Line Manager has completed this section, send it as an email attachment to a Senior Manager (e.g., Trust R&D Manager for NHS employees) with a copy to the applicant.* | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Senior manager/Trust R&D manager to complete** | | | |
| I support this NIHR INSIGHT Programme North West Masters in Research application | | | |
| **Signature** |  | **Date** |  |

**Upon completion, submit this form to** [**INSIGHTNW@UCLan.ac.uk**](mailto:INSIGHTNW@UCLan.ac.uk)

# Section 10: EDI Monitoring

**Equality, Diversity and Inclusion Monitoring Information**

The INSIGHT Northwest Regional Programme will promote, plan, manage and monitor equal opportunities and, in particular, will monitor race, gender and disability in relation to its student and staff profiles. Where necessary, appropriate positive action may be taken to ensure an equitable gender balance and appropriate representation of minority ethnic groups and people with disability.

It would be helpful if you could supply the following information to assist us in meeting this requirement.

The information you supply will be kept strictly confidential. It will not be seen or used during the selection process and will be anonymised for statistical monitoring purposes only.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Age |  | | | |
| Date of Birth |  | | | |
| Sex | Choose and item... | | | |
| Does your gender identity match your sex as registered at birth? | | | | Choose an item... |
| Marital Status | Choose an item... | | | |
| Sexual Orientation | Choose an item... | | | |
| Nationality | Choose an item... | | | |
| Nationality detail |  | | | |
| Religion/Belief | Choose an item... | | | |
| Ethnic origin | Choose an item... | | | |
| National Insurance Number | | Choose an item... | | |
| Disability is defined by the Equality Act 2010 as a physical or mental impairment which has a substantial and long-term (at least 12 months) effect on your ability to carry out normal day-to-day activities. | | | | |
| Do you have a disability as defined by the Equality Act? | | | Choose an item... | |
| Would you like assistance to participate in interview? | | | Choose an item... | |

# Appendix 1: Eligible Regulatory Bodies

Applicants applying for an NIHR INSIGHT North West Master’s Studentship MUST be registered, or working towards registration, with one of the following regulatory bodies:

* Academy for Healthcare Science
* General Chiropractic Council
* General Dental Council
* General Optical Council
* General Osteopathic Council
* General Pharmaceutical Council
* Health and Care Professions Council
* Nursing and Midwifery Council
* Social Work England
* UK Public Health Register