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| **Bayer Head Office Use Only** |
| **Date request received:\***  |  |
| **Job Bag Number:\*** |  |
| **Agreed Funding Amount:\*** |  |

**APPLICATION FORM FOR DONATIONS AND GRANTS**

**All fields marked with an asterisk (\*) are mandatory and must be completed.** Incomplete request forms cannot be processed. You may be contacted for further information before your application is fully assessed.

Applications must be submitted **at least 8 weeks** ahead of estimated project start date to allow sufficient time for your request to be reviewed and processed. If you have not heard from us within 6 weeks of the date of your application, you may wish to contact us via the email address below to request an update.

**Please note that we do not consider Donations and Grants requests that are:**

* **retrospective in nature**
* **to an individual or for individual benefit**
* **to a private, for-profit organisation**
* **related to projects/activities outside of the UK**
* **linked to specific medicines/products/devices**

**These requests will be rejected.**

If you require more information on the Donations and Grants application process, please refer to the Donations and Grants application guidance document which is available on the Donations and Grants section of the Bayer UK website.

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| **Please return completed form to:** | MedAdmin@bayer.com ***Note:*** *applications can only be accepted and considered via this email address* |

**Organisation and requestor details:**

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| **Organisation Name: \*** |  |
| **Organisation Address: \*** |  |
| **Organisation Postcode: \*** |  |
| **Requestor Contact Name: \*** |  |
| **Requestor Contact Email: \*** |  |
| **Requestor Contact Number: \*** |  |
| **Payee name: \******\*\*this is the organisation name to be put on the contract in the event of a successful application, and it must match the account where funds will be transferred. Please refer to the guidance document for further information\*\****  |  |

**Request details:**

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| **Please select the therapy area/specialty that your request relates to** | Cardiology      Oncology      Ophthalmology      Radiology      Women’s Health      Renal Health      Other, please specify  |
| **Please provide a detailed description of the Donation or Grant requested (max 500 words):\*** ***\*\*Please also attach supporting documentation such as, project plans, meeting agenda, timelines etc, to help us fully understand and consider your application. Insufficient detail will lead to the rejection of the request\*\**** |  |
| **Please specify the objective of this Donation or Grant: \*** |  |
| **Please specify how this Donation or Grant will support healthcare, scientific research, or education: \*** |  |
| **Please specify how this Donation or Grant will support one or more of the** [**UN Sustainable Development Goals**](https://sdgs.un.org/goals)**:** |  |
| **Please specify project timelines, including the estimated start and end dates:\******\*\*Please note we cannot approve requests for activities that have already started/taken place, and may not be able to support requests with a start date less than 8 weeks from the application submission\*\**** |  |
| **Please provide details on how you expect the project to be supported beyond the provision of the Donation or Grant?** |  |
| **Total requested funding amount\***  |  |
| **Organisation registered for VAT purposes?\*** | **Yes       No** |
| **Full breakdown of costs\*:** ***\*\*Please also attach quotes and include detailed itemisation and breakdown of costs to account for the level of requested funding\*\**** |  |
| **Please disclose full details regarding additional applications to other organisations for this Donation or Grant: \*** | [Include the name of company, funding amount requested, including whether total or part funding has been requested from an additional organisation]  |
| **Please provide full details, to the best of your knowledge, regarding any previous funding that your organisation has received from Bayer within the last two years: \*** |  |

**Please mark the following boxes to confirm your understanding (please note: your application cannot be processed unless all boxes have been ticked and your signature has been provided below):**

[ ] I understand that information provided on this form will be used for the purposes of assessing and processing the application and will be retained on file for recording and auditing purposes.

[ ] I confirm that the information provided is accurate and I have authorisation from my employers to approach Bayer for this support.

[ ] I understand that if the application is successful, Bayer reserves the right to release details regarding the support provided if requested to do so, and Bayer will, in accordance with the requirements of the ABPI Code of Practice, make public disclosures of any payments, benefits in kind or other transfers of value provided.

[ ] I confirm that if my application is successful, a clear and prominent declaration of Bayer’s Donation or Grant in relation to the resulting material/activity must be made clear

**Data Privacy:**

I acknowledge that Bayer and its agents may collect, store and process my personal data for the purposes of assessing and following up on your donations and grants request. I acknowledge my personal data may be transferred to the members of the Bayer group for such purposes (including for the avoidance of doubt, outside the United Kingdom and the European Economic Area (EEA). Bayer will treat such personal data in compliance with all applicable data protection legislation. It is in Bayer’s legitimate interests to process your personal data for these purposes and this is the legal basis for such processing. For further information about this and your rights, please refer to our Privacy Policy (link below).

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| **Name \***  | **Title \***  | **Signature \***  | **Date \***  |
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***PRIVACY NOTICE***

*All of the information and personal data shared with us will be protected and kept confidential and otherwise processed, in line with our Privacy Statement (accessible at* [*https://www.bayer.co.uk/en/abpi-code-relevant-contracts-and-forms-privacy-statement*](https://www.bayer.co.uk/en/abpi-code-relevant-contracts-and-forms-privacy-statement)*) and local regulations, including for the purposes of any financial disclosures required by the ABPI Code of Practice.*