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**DAPHNE JACKSON FELLOWSHIP APPLICATION**

**CV Form**

Please fill in and return all pages by email to DJMFT@surrey.ac.uk

**PERSONAL DETAILS**

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| --- | --- |
| NAME: |  |

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| PERSONAL PROFILE: |  |
| *(Please outline your experience in no more than two lines)* |

**CAREER BREAK**

|  |  |
| --- | --- |
| DATES *(MM/YYYY – MM/YYYY)*: |  |
| ACTIVITIES DURING BREAK: |  |

**QUALIFICATIONS –** Please outline your relevant academic qualifications, starting with the most recent.

*POSTGRADUATE QUALIFICATIONS*

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| --- | --- | --- | --- |
| QUALIFICATION: |  | DATES:*(MM/YYYY – MM/YYYY)* |  |
| UNIVERSITY: |  | DEPARTMENT: |  |
| THESIS TITLE: |  |
| SUPERVISOR: |  |

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| --- | --- | --- | --- |
| QUALIFICATION: |  | DATES:*(MM/YYYY – MM/YYYY)* |  |
| UNIVERSITY: |  | DEPARTMENT: |  |
| THESIS TITLE: |  |
| SUPERVISOR: |  |

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| --- | --- | --- | --- |
| QUALIFICATION: |  | DATES:*(MM/YYYY – MM/YYYY)* |  |
| UNIVERSITY: |  | DEPARTMENT: |  |
| THESIS TITLE: |  |
| SUPERVISOR: |  |

*UNDERGRADUATE QUALIFICATIONS*

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| --- | --- |
| QUALIFICATION & SUBJECT: |  |
| UNIVERSITY: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | CLASS MARK: |  |

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| --- | --- |
| QUALIFICATION & SUBJECT: |  |
| UNIVERSITY: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | CLASS MARK: |  |

*If you need more room to tell us about your education please use the space provided at the end of this document.*

**EMPLOYMENT HISTORY** – Please outline your full employment history, including relevant voluntary work, starting with the most recent. If your work is part-time, please state what proportion of full-time employment.

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| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

|  |  |
| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

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| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

|  |  |
| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

|  |  |
| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

|  |  |
| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

|  |  |
| --- | --- |
| POSITION: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | EMPLOYER: |  |
| FULL-/PART-TIME & %FTE |  | LOCATION: |  |
| YOUR ROLE *(including title of research project if applicable)*: |  |
| *(Please outline your role in no more than two lines)* |

*If you need more room to tell us about your employment history please use the space provided at the end of this document.*

**TECHNICAL SKILLS AND EXPERTISE** – Please outline any relevant technical skills and expertise in no more than 100 words.

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**PROFESSIONAL MEMBERSHIPS AND ACTIVITIES** – Please outline your professional memberships and any related activities (e.g. sitting on committees, peer-review responsibilities etc)

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| ORGANISATION | DATES:*(MM/YYYY – MM/YYYY)* | RELEVANT ACTIVITIES |
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**RESEARCH GRANTS –** Please outline any research grants you have received.

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| --- | --- |
| NAME OF AWARDING BODY: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | TYPE OF GRANT: |  |
| DETAILS: |  |

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| --- | --- |
| NAME OF AWARDING BODY: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | TYPE OF GRANT: |  |
| DETAILS: |  |

|  |  |
| --- | --- |
| NAME OF AWARDING BODY: |  |
| DATES:*(MM/YYYY – MM/YYYY)* |  | TYPE OF GRANT: |  |
| DETAILS: |  |

**AWARDS** – Please outline any travel grants, scholarships, prizes for presentations etc you have received. If you have received more than five, please include the five most relevant, starting with the most recent.

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| --- | --- |
| NAME OF AWARDING BODY: |  |
| YEAR AWARD RECEIVED: |  | TYPE OF AWARD: |  |
| DETAILS: |  |

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| NAME OF AWARDING BODY: |  |
| YEAR AWARD RECEIVED: |  | TYPE OF AWARD: |  |
| DETAILS: |  |

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| DETAILS: |  |

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| DETAILS: |  |

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| NAME OF AWARDING BODY: |  |
| YEAR AWARD RECEIVED: |  | TYPE OF AWARD: |  |
| DETAILS: |  |

**PEER-REVIEWED PUBLICATIONS** – Please list your peer-reviewed publications; you may also include any that have already been submitted. Please include the authors (highlighting yourself in bold), the title, date and publication. If this is a national publication, indicate what country it is published in. If you have more than fifteen publications, please include the fifteen most relevant, starting with the most recent.

If you have no publications please state why.

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| ORCID iD: |  |
| *(If you have an ORCID identifier please give it here)* |

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| **PEER-REVIEWED PUBLICATIONS**  |

**PRESENTATIONS** - Please list the eight most relevant international or national conference presentations that you have given. Please divide these into oral and poster presentations and indicate if they were invited. Please only include presentations for which you were either first or last author.

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**ADDITIONAL INFORMATION** – Please use the space below to tell us about any additional qualifications and employment history that you were not able to include above. Do not use this space for any other information.

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Form updated August 2018

To comply with the General Data Protection Regulations (GDPR), the Daphne Jackson Trust will take all reasonable steps to ensure that the information given in this form will be processed securely in accordance with data protection legislation. No third parties will have access to this data unless there is a legal obligation for us to provide them with this. You should be aware that under data protection legislation an individual is entitled to request access to any information the Trust holds about them.