**ADRIAN STOKES MEMORIAL FELLOWSHIP**

**APPLICATION FORM**

**Trinity College Dublin**

**SUBMISSION DEADLINE: 5pm 10th November**

*ADRIAN STOKES MEMORIAL FELLOWSHIP: This Scholarship was founded in 1929 in memory of Adrian Stokes, Professor of Bacteriology and Preventative Medicine 1919-22. These awards will be made on the recommendation of a 3-person panel derived from the membership of the postgraduate teaching and learning committee in the School of Medicine.*

*A candidate for the fellowship must*

*(1) be a duly qualified medical practitoner, or a graduate in science in pathology or microbiology, and*

*(2) wish to pursue further the study of pathology or microbiology in any of their branches*

*A successful candidate must for a period of not less than six months during his/her year of tenure pursue further the study of pathology or microbiology in any of their branches at a university, school, hospital or institution (other than Trinity College Dublin) to be approved by the Director of Postgraduate Teaching and Learning in the School of Medicine. Value up to €4,000.*

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| **Your Details** |
| Student Name |  |
| Student Email |  |
| Student Number |  |
| Supervisor Name |  |
| Supervisor Email |  |
| Provisional Title of Thesis |  |
| Department |  |
| Stage of Research | PhD [ ]; MD [ ]; MScRes [ ] | Year of study [ ] |

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| **Please confirm your eligibility** |
| I am *a qualified medical practitioner* | YES { ] |
| I am *a graduate in science in pathology or microbiology* | YES { ] |
| I *wish to pursue further the study of pathology or microbiology* | YES { ] |

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| **Current Financial Support** |
| Indicate Your Current Support |  |
| Indicate any funding source(s) |  |
| Indicate any other applications you have made |  |
| Indicate how you will use this award if granted |  |

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| **List up to five publications** |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

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| **Please outline for what purpose you will use this award (Max 200 words)** |
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| **Please provide your CV below (2 Pages)** |
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| **Please include letter of support from your supervisor (Max 200 words)** |
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| **Signatures** |
| **Applicant:**Signature Date  |
| **Supervisor**Signature Date  |
| Electronic signatures may be pasted into the form. |

Incomplete applications will not be considered.

Please email complete applications to: medicinepgawards@tcd.ie by 5pm 10th November

**Prof. Michael Carty|**

Associate Director, Postgraduate Teaching & Learning (fellowships) | School of Medicine | Trinity College Dublin

*Selection Committee: A 3-person panel derived from the membership of the postgraduate teaching and learning committee in the School of Medicine.*

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**SCHOOL OF MEDICINE**

**APPROVALS AND NEXT REVIEW DATE OF THIS DOCUMENT**

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| **Updated by:** | **Prof Michael Carty****(Associate Director, Postgraduate Teaching & Learning (fellowships), School of Medicine)**  |  |  |
| **Signature:** | *Original version of this document has been signed and stored.* | **Date:** | **11th Sept 2025** |
| **Reviewed by:** | **Prof Stephenn Maher****(Associate Director, PGTL, School of Medicine)** |  |  |
| **Signature:** | *Original version of this document has been signed and stored.* | **Date:**  |  **11th Sept 2025** |
| **Approved by:** | **XXXXXXXXXXXX****(Committee Member, PGTL, School of Medicine)** |  |  |
| **Signature:** | *Original version of this document has been signed and stored.* | **Date:** |  **XXXXXXXXXXXXX** |

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| **PGTL Committee Approval** | **This document was approved by the Postgraduate Teaching and Learning Committee (PGTL), School of Medicine (XXXXXXXXX).** |
| **Next Review Date** | **The Postgraduate Teaching and Learning Committee (PGTL), School of Medicine will review this document every two years. This document, may be subject to quality appraisal such as the School review.****The next review date of this document will be January 2028.**  |

**VERSION HISTORY**

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| **Version** | **Description of Change** | **Revised By** |
| **3.0** | **Updated** | **Michael Carty** |