**SUPPORT OF JOINT RESEARCH GROUPS**

**(SCHEME 3 GRANTS)**

**MID-TERM PROGRESS REPORT FORM**

If you wish to apply for a renewal grant this form should be submitted with your application by   
**15 September**. The final date for receipt of reports for Scheme 3 grants is **31 December**.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Reference number: | | |  | | | | | | | |
| **Grantee’s name:**  (Full name with title eg Prof, Dr etc) | | |  | | | | | | | |
| **Email address:** | | |  | | | | | | | |
| **Nature of award:** (Please give the overall title of your group) | | | **Support of joint research group** | | | | | | | |
| **Conditions of the award:** | | | The grant shall be used for the purposes described in the application. Minor variations from the proposed activities are acceptable as long as they are clearly within the general framework enunciated in the application. Please refer to your Grant Offer and Claims Form for the particular conditions relating to your grant. | | | | | | | |
|  | | | | | | | | | | |
| **For each of your meetings please complete attendance figures as follows:** | | | | | | | | | | |
| **Academic Year 1: \_\_\_\_\_** | | | | | | | | | | |
| Date of Meeting: |  | | |  | |  | | |  | |
|  | Male | Female | | Male | Female | Male | | Female | Male | Female |
| Invited speakers |  |  | |  |  |  | |  |  |  |
| Research students (local) |  |  | |  |  |  | |  |  |  |
| Research students (other) |  |  | |  |  |  | |  |  |  |
| Other participants (local) |  |  | |  |  |  | |  |  |  |
| Other participants (other) |  |  | |  |  |  | |  |  |  |
| **Total** |  |  | |  |  |  | |  |  |  |
| **Signature of Grantee:**  **Print name:** | | | | | | | | | | |
| **Please return this form to:**  Mr Anthony Byrne, Grants Administrator, London Mathematical Society,De Morgan House, 57-58 Russell Square, London WC1B 4HS.  Alternatively – [grants@lms.ac.uk](mailto:grants@lms.ac.uk) | | | | | | | | | | |
| **For office use only**  Date Report Received \_\_\_\_\_\_\_\_\_\_\_ D/b **🞏**  Date Acknowledged \_\_\_\_\_\_\_\_\_\_ | | | | | | | **Authorised by:**  Cttee mem \_\_\_\_\_\_\_\_\_\_\_\_\_\_  PS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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