**JEAN SHANKS / PATHOLOGICAL SOCIETY OF GREAT BRITAIN AND IRELAND PART D**

**HEAD OF SCHOOL, DIVISION or EQUIVALENT & FINANCE /ADMINISTRATIVE OFFICER TO COMPLETE**

# CLINICAL LECTURER SUPPORT GRANT

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### CANDIDATE’S NAME

**(In full, surname first)**

Please pass this sheet to your present Head of School, Division or equivalent and finance/administrative office to endorse your application

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# The above-named candidate has applied for a Pathological Society CLINICAL LECTURER SUPPORT GRANT. Would you please sign below to endorse the application

**1. Name of Head of School, Division or equivalent**

**Address:**

 **Tel:**

 **Fax: e-mail:**

 **Signature: Date:**

**2. Name of Finance/Administrative Officer:**

**Address:**

 **Tel:**

 **Fax: e-mail:**

 **Signature: Date:**