**Guidance for Completion of scanning application form**

This set of guidelines should assist you with the completion of our scanning application. However, if there is anything you are unsure of or need further clarification on, then please get in touch.

This is best done through the scanning inbox where the forms are submitted -

[**Spmic\_scanning@nottingham.ac.uk**](mailto:Spmic_scanning@nottingham.ac.uk)

**Title** – what is your project called

**Category –** which category or categories best apply

**Short name –** max 8 characters – this will be the name on the booking system

**Brief Description –** max 180 characters - some brief details of what you are aiming to achieve with your project

**Names and usernames of those able to book on Calpendo –** list here all personnel that you would like to be able to book scanning sessions on your behalf. Please note that they will need to have authorized Calpendo access to be able to do this. Please contact Sarah Wilson [sarah.wilson1@nottingham.ac.uk](mailto:–sarah.wilson1@nottingham.ac.uk) if new users are required.

**Set up / testing free hours required –** how many hours do you require FREE of CHARGE to set up your study or test your protocols – specify hours and scanner required.

**Study hours and funding for each facility required –** detail the hours required for each scanner to complete your study. Please specify the price per hour that you are paying for these hours. Please ensure that the scanning time is sufficient to set up the study, get the participant into and out of the scanner, transfer any data and tidy up afterwards.

**Explain why your study is not fully funded and or why you require free time –**

Why are your hours not at the current fully funded rate as stated in the form? An explanation may relate to the date of your grant approval. Please also justify why you require the free hours that you have requested – this free time will be scrutinized by the Executive Committee before approval so please give as much detail as you can.

**Other facilities –** state yes or no

**Scanner Operator Required? –** do you require a member of staff from SPMIC scanning team to assist with your scanning sessions-

**Is VAT payable? –** not usually when the funds are held by the Uni of Nottingham. Normally the case where we are sending an invoice to an external organization (including NUH) unless we can show collaboration (eg a joint grant application) – This must be clarified BEFORE scanning starts.

**Total Income for SPMIC scanning** – number of hours x rate per hour. Please indicate if this is not 100% by detailing the %( eg 10 hours X 270 = £2700 – 60% )

**Funding Source –** date of grant submitted and funding requested. If BRC funded, please state which BRC theme this project comes under.

**Account Code / Activity Code / Cost Centre –** please provide the details if known at the outset. If not known, we will require them BEFORE scanning can commence.

**Contact name(s) / email(s) for invoicing and financial queries** who needs to be advised of the monthly charges for the scanning carried out? Who can we contact with any queries?

**Split of funding across Financial years** this refers to University Financial year which runs from 1st August to 31st July – how much of your total spend will be made in each year – this helps to forecast income and scanning requirements.

**Details of funding constraints –** is there any deadline within the financial year that your funds should be spent by?

**Start date of scanning** when will you begin to scan your volunteers / test scans?

**End date of scanning** when do you anticipate finishing your scanning

**Volunteer Booking details** how many volunteers, how many scans per volunteer, how long for each scan. This should total the same as your funded hours requested. E.g. 5 volunteers scanned twice for 30 mins each time = 5 hours

**Ethics code(s)** what is the ethics code that covers your project? Please provide this when requested. Also confirm that the safety form and information about incidental findings is taken from the information on the SPMIC website.

**Data sharing arrangement** what does your ethics say?

**Other approvals / agreements obtained** give details things such as R & D, contracts with industrial partners

**Indicate and project specific safety issues or increased likelihood of incidental findings that you foresee.** Does the nature of your study and scans mean that there is likely to be an increased occurrence of incidental findings? Additional risk assessments may be required in this case.

**Project details –** any further information which can also be attached separately – e.g sequences to be developed, full details of fMRI paradigms. MEG analysis approaches anticipated. Include references.

**Data analysis plans –** do you require analysis support ?– this may incur an extra charge

**Relevant prior work particularly using SPMIC or predecessor facilities –** state any previous project name and dates together with hours and funding. Any published dates?

**Select the user group most appropriate to review your project –** which of the user groups listed would be best to review your application. Please circle the relevant one or delete those not appropriate.

**Protocol –** details of the protocol you will be using for your scanning. Please provide as much detail as you can to enable the SPMIC to fully understand what your requirements are.