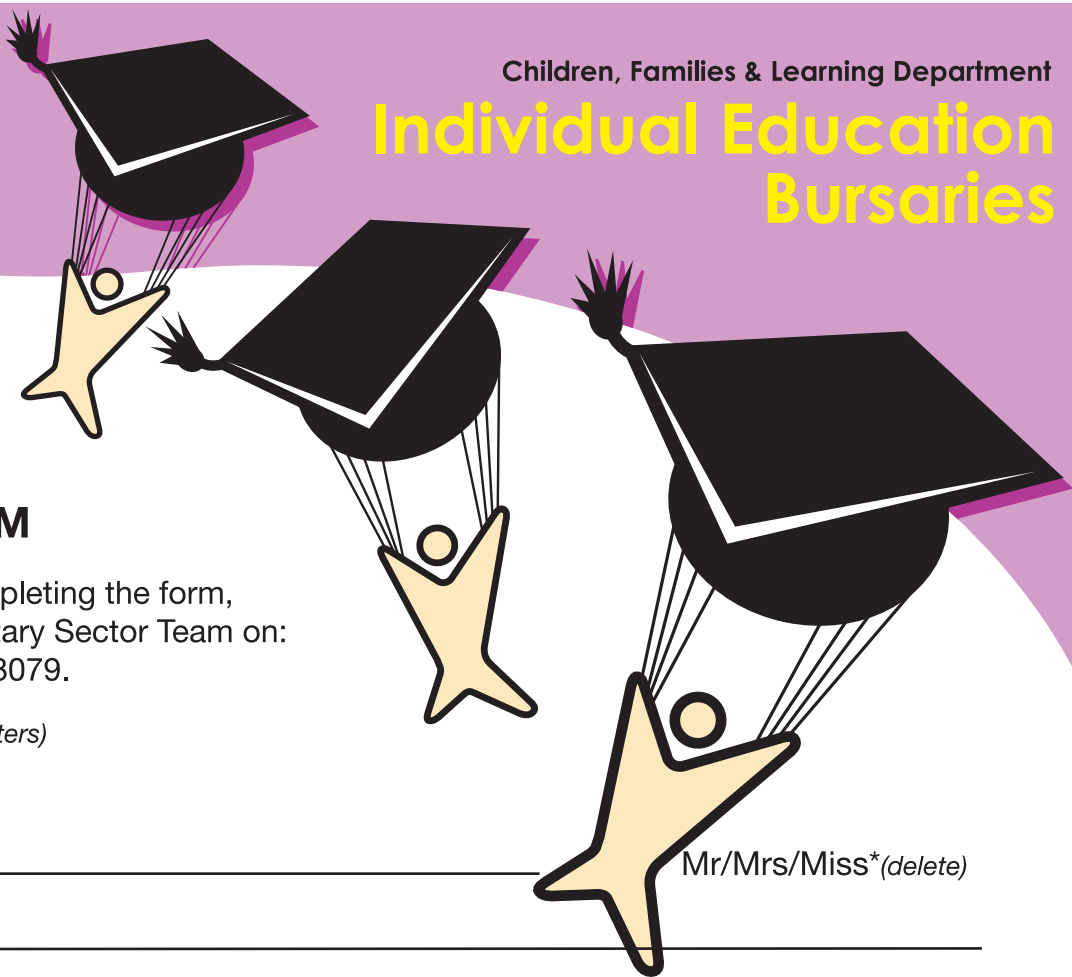


Individual Education Bursaries



APPLICATION FORM

If you need any help in completing the form, please telephone the Voluntary Sector Team on: 01642 728081 or 01642 728079.

(Please type or write in capital letters)

THE APPLICANT

Surname _____ Mr/Mrs/Miss* *(delete)*

Forenames _____

Date of Birth _____ Age _____

Address _____

Email Address _____

Where did you hear about these bursaries?

Daytime telephone number _____

If under 18 years, please can your parents/guardian* supply the following information

Name _____

Is Parent/Guardian* employed Yes/No

If unemployed, are you in receipt of any benefits, and if so, which ones?

Signature of parent/guardian* _____
**(Please delete as appropriate)*

PARENT/GUARDIAN/APPLICANTS DETAILS OF EMPLOYMENT *(if applicable)*

Name and address of Employer _____

Position Held _____ Date of Appointment _____

SCHOOLS AND COLLEGES ATTENDED

a) Primary _____ Dates from _____ to _____

b) Secondary _____ Dates from _____ to _____

c) Sixth form _____

Further Education _____ Dates from _____ to _____

d) Higher Education _____ Dates from _____ to _____

Confirmation of attendance from your current College/University:

I confirm that _____

Is a student at _____

Signed _____

Position _____

College/University Stamp

DETAILS OF REQUEST *(continue on separate sheet if necessary)*

Purpose of grant aid _____

Breakdown of expenditure _____

Living/travel and any other expenditure you will incur whilst studying

Amount required _____

Date Grant required _____

ADDITIONAL INFORMATION *(if applicable)*

Please give details of:

Qualifications you are working towards

How the bursary will be of benefit to you

Achievements in last 2 years _____

OTHER GRANTS

Have you applied for a grant from Middlesbrough Council in the last 2 years? Yes/No

If yes, please give details *(continue on separate sheet if necessary)*

Year _____ Amount requested _____ Result _____

Year _____ Amount requested _____ Result _____

Have you applied for a grant from any other source in the last 2 years?

Yes/No

If yes, please give details *(continue on separate sheet if necessary)*

- (a) Source _____ Date of application _____
Amount requested _____ Result _____
- (b) Source _____ Date of Application _____
Amount requested _____ Result _____

Are you currently applying to any other organisations for assistance?

Yes/No

If yes, please give details *(continue on separate sheet if necessary)*

- (a) Organisation _____ Date of application _____
Amount requested _____ Result _____
- (b) Organisation _____ Date of Application _____
Amount requested _____ Result _____

What efforts have you made to raise your own funds? *(continue on separate sheet if necessary)*

Is there anything else you would like to add in support of your application?
(continue on separate sheet if necessary)

Please note that greater consideration will be given to those most in need of financial support. The discretion of Middlesbrough Council will be applied.

DECLARATION

I confirm that the statements supporting this application are correct.

Middlesbrough Council reserves the right to recover any Grant awarded in the event of non-compliance with terms and conditions of Grant aid.

Signed _____ Date _____

CHECKLIST:

Before submitting your application form, please ensure you have enclosed, where applicable, the following supporting information:

- Any official correspondence from your current/prospective place of study confirming your place/attendance.
- Written estimates of costs, and if applicable, any other additional information to confirm the purpose of grant aid.
- Written endorsement from your tutor.

PLEASE RETURN COMPLETED APPLICATION FORM AND SUPPORTING INFORMATION TO:

Voluntary Sector Team
Middlesbrough Council
Children, Families and Learning Department
PO Box 69
1st Floor
Vancouver House
Gurney Street
Middlesbrough
TS1 1EL

