

# Drigg Charity : Community Bursary Fund Application Form



Please read through the guidance notes before you complete this application. This form has been designed to enable you to provide the standard information needed in order to assess your application. Your answers should show that you have thoroughly considered every aspect of your application.

### APPLICANTS DETAILS:

1	Applicant's forename(s)	
2	Applicant's surname	
3	Applicant's full address including post code (main residence)	
4	Date commencement of residing parish	Month: __ __ Year: ____
5	Date of birth	Day: __ __ Month: __ __ Year: ____
6	Current work/study status	Full time work / Part time work / Retired / Unemployed / Student / Other _____ (delete as appropriate)

### COURSE/EDUCATION DETAILS:

7	Course start date	Day: __ __ Month: __ __ Year: ____
8	Course end date	Day: __ __ Month: __ __ Year: ____
9	Multiple years	Yes / No (delete as appropriate) If Yes, how many years: __
10	Course title	
11	Description of Course (Outline the main aims of the training)	
12	Course provider	
13	Course location Including post code	



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**TRAINING BENEFIT:**

14	Detail the benefits of the course. Why are you undertaking the training?  How can this benefit you and our community?	
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**TRAINING COSTS:**

15	Detail costs associated with the course  Please give details of course fees, books, travel etc.	
		Total cost: £ _____

**REFEREES:**

16	Please provide the details of two referees from the parish (not relatives) in support of your applications	Title: Mr / Mrs / Ms / Dr / Other ____ (delete as appropriate) Forename & Surname: Address:
		Title: Mr / Mrs / Ms / Dr / Other ____ (delete as appropriate) Forename & Surname: Address:

**DATA PROTECTION:**

We may hold the information submitted on this form on computer and use it for statistical purposes. We may provide copies of the information to individuals or organisations that are helping us to assess applications or monitor grants.

**DECLARATION:**

*I confirm that to the best of my knowledge and belief, all of the information I have given in this application is true and correct and I will ensure that I inform you immediately of any changes to the information provided.*

Name:	Signature:	Date:
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