

**Bursary Award Application Form**

**THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SECTION 1. Personal Details** | | | | |
| **First name:** |  | **Surname:** |  | |
| **Address:** |  | | | |
| **Postcode:** |  | **Date of Birth:** | |  |

|  |  |
| --- | --- |
| **Home Telephone No:** |  |
| **Mobile No:** |  |
| **Email address:** |  |

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| **SECTION 2. Place of study/apprenticeship** | | | | |
| **Name of institution:** |  | | | |
| **Address:** |  | | | |
| **Postcode:** |  | **Course start Date:** |  | | |
| **Course Title:** |  | | | | |
| **Length of course:** |  | **Have you been accepted?** | | Yes  No | |

|  |  |
| --- | --- |
| **SECTION 3. Cost** | |
| **Total cost of project** | £ |
| **Yearly cost of project** | £ |

|  |  |
| --- | --- |
| **SECTION 4. Personal Statement** | |
| **Why should you be given a Bursary Reward and how will it benefit you?** | |
| Please write a brief statement here | |
| **SECTION 5. Declaration** | |
|  | I confirm to the best of my knowledge that the information given on this form is true and agree to the terms and conditions of this scheme.  **Applicant:**  **Signed: ……………………………………………………………. Date: ………………………………………….**  If applicant is under 16, they will need to have consent from their guardian/parent.  **Guardian/Parent:**  **Signed: ……………………………………………………………. Date: ………………………………………….** |

Please return this form by hand or post to: **Barnsbury Housing Association, Cloudesley House, 16b Cloudesley Street, London, N1 0HU** – Please label your envelope **‘Private & Confidential’**.

**Tel:** 0207 704 2324 **Fax**: 0207 424 5483 **Email**: [info@barnsbury.org](mailto:info@barnsbury.org) **Web**: [www.barnsbury.org](http://www.barnsbury.org)