**Eagle House Bursary 2019**

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| Deadline: | Friday 19 July 2019 | Decisions: | w/c 19 August 2019 |

Please download this form, complete it electronically and email it to info@somersetcf.org.uk with the title ‘Eagle House bursary 2019’.

**Your personal details**

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| Surname: | Click here to enter text. | Forename(s): | Click here to enter text. |
| Address: | Click here to enter text. |
| Postcode: | Click here to enter text. | Tel no: | Click here to enter text. |
| Email: | Click here to enter text. |
| Date of birth: | Click here to enter text. | Age: | Click here to enter text. |

**Your intended course**

|  |  |
| --- | --- |
| University / college: | Click here to enter text. |
| Full course title: | Click here to enter text. |
| UCAS course code: | Click here to enter text. |
| Qualification (e.g. BA, BSc): | Click here to enter text. |
| Course length (years): | Click here to enter text. |
| Full time /part time: | Click here to enter text. |
| Expected completion date: | Click here to enter text. |

**Your eligibility**

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| --- | --- |
| Under which Local Authority(s) did you receive support from Children’s Social Care? | Click here to enter text. |
| Total length of time supported by Children’s Social Care: | Click here to enter text. |
| Will your Local Authority be supporting you financially at university? | Click here to enter text. |
| If yes, how much are they offering? | Click here to enter text. |
| Is this your first time at University? | Click here to enter text. |
| Did you apply for the full student finance package that you are entitled to? | Click here to enter text. |
| If not, please explain why: | Click here to enter text. |
| Do you have a social worker? | Click here to enter text. |
| If yes, please provide their contact details: | Name: Click here to enter text.Tel no: Click here to enter text.Email: Click here to enter text. |

**Your supporting statements (the boxes will expand as you write or paste in text)**

Please paste in your UCAS statement below (500 words)

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| Click here to enter text. |

Please explain why you are applying for a bursary and what difference you think it will make to your higher education experience (250 words).

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| Click here to enter text. |

What are your main interests outside of education (150 words)?

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| Click here to enter text. |

Please turn over

**Declaration**

I declare that the information that I have given on this form is correct and complete to the best of my knowledge.

I understand that giving false information will automatically disqualify my application and disciplinary action may be taken.

I understand that my application details will be shared with the Somerset Community Foundation Trustees in order to review my application and make a decision on my award.

I understand that by signing this application I confirm I have understood and will adhere to the bursary conditions should I receive the bursary. Failure to do so may result in the removal of part or all of the bursary.

Your Name (*in capitals*) Click here to enter text.

Date Click here to enter text.

We will ask you to sign this declaration if you are successful.