

## **Stroud and Rodborough Educational Charity**

Registered Charity No: 309614

## **Instructions For Completion**

#### PLEASE READ THIS FIRST:

To be considered for a grant from the Charity, students must:

- be under 25 years (at the date of application)
- live in the areas covered by the former Stroud and Nailsworth Urban District Councils and Stroud Rural District Council, which includes Bisley, Chalford, Cranham, Horsley, King's Stanley, Leonard Stanley, Minchinhampton, Miserden, Oakridge, Painswick, Pitchcombe, Randwick, Rodborough, Stonehouse, Thrupp, Whiteshill and Woodchester

### PLEASE COMPLETE IN BLACK INK

TO AVOID DELAY

YOU MUST COMPLETE SECTIONS 1 TO 4 OF THIS FORM All applications must include a Professional Endorsement.

**NB: FOR SCHOOLS** 

Within the Professional Endorsement we ask that schools make reference to their allocation of Pupil Premium grant funding that has been included to support the application for visits, additional tuition and other activities submitted on their website as part of their annual Pupil Premium statement and review. This enables the trustees to be able to understand the support that is required and fairly distribute any funds.

(The information provided enables the Trustees to assess the request fully. All information is kept confidential, and the forms are securely destroyed after the application has been considered)

### **COMPLETED FORMS SHOULD BE RETURNED TO:**

Shani Baker, Clerk **Stroud and Rodborough Educational Charity** Post to: 14 Green Close, Uley, Glos, GL11 5TH Email: info@stroudrodboroughec.org

Phone: 01453 860379

Trustees meet quarterly in January, April, July, and October Forms should be returned at least 2 weeks before the next trustee meeting Date of the next meeting can be obtained from the Clerk (see contact details above)



# **GRANT APPLICATION FORM**

**SECTION 1: APPLICANT DETAILS** (please complete in black ink and in block capitals)

FULL NAME OF APPLICA	NT		
First names:			
Surname:			
HOME ADDRESS			
Postcode:			
DATE OF BIRTH			
PLACE OF EDUCATION			
Present place of			
education:			
Previous schools			
attended (if applicable):			
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		In DETAILS (please complete licant, even if they do not live a	the section below for all adults
who are responsible for the	. αρρι	meant, even if they do not live a	it the same address).
		Responsible Adult 1	Responsible Adult 2
Full Na	me:		
Relationship to applicant:			
Address:			
Telephone No:			
Email address:			
Occupation/Employment:			
Monthly gr	nss		
income/benef			
Other dependent childr	en:		



### **SECTION 3: GRANT APPLICATION DETAILS**

PURPOSE OF GRANT	Γ:				
			(use sectio	n 5 to add addition	al information if necessary)
Tot	tal Cost:	£			
Contribution by ap	plicant:	£			
Contribu		£			
responsible a					
Amount asked f		£			
this	charity:				
				C	
Please give details of any amount asked for from	s of any	£		Source:	
	£		Source:		
other s	ources:	L		Source:	
SIGNATURES: Compl	eted on h	eha	f of parent.		
ordinir ordor dompr	otou on t	, 01101	or par one.		
Responsible				ъ.	
adult:				Date:	
Applicant				Date:	
Applicant:				Date:	



	(this <b>MUST</b> be completed by a teacher, lecturer, or education
ofessional)	
	LETING THE ENDORSEMENT:
Name	
Signature:	
Date:	
Position	
Institution:	
Daytime Telephone No:	



**SECTION 5: FURTHER INFORMATION** (please include any additional information about the purpose for which the grant is required to support your application) Where did you hear about the Stroud & Rodborough Educational Charity?

