

THE SIDNEY PERRY FOUNDATION

(Registered Charity Number 313758)

Incorporating

THE COVENANTORS EDUCATIONAL TRUST

Form of Application for a Grant

To be returned to: **THE SECRETARY, THE SIDNEY PERRY FOUNDATION,
PO BOX 889, OXFORD, OX1 9PT, UK.**

www.the-sidney-perry-foundation.co.uk

BLOCK CAPITALS TO BE USED THROUGHOUT

APPLICATION NO.

1. Full Name of Applicant

Married/Partnership/Single

2. Permanent UK Address:

3. Age

Date of Birth

Nationality.....

Country of Origin.....

4. Particulars of Previous Education:

(a) Schools and Colleges attended, with years of entering and leaving

(b) Details of any Scholarship held at School or College

(c) Examinations taken, giving dates and results

5. Employment (if any) to date:

Employer	Dates	Salary	Nature of Work
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6. Details of Proposed Course:

(a) Name of University, College or other Educational Institution

(b) Term and Year of entry

(c) Course of study

(d) Duration

7. Proposed future work, after completion of course of study:

8. Period for which grant is required, and from what date:

9. Names/addresses of other Bodies to which application for funds has been made & status of applications

10. Source of introduction to Foundation

11. **Names and addresses of two Referees (at least one of these should be able to supply an original, dated, signed academic reference on official paper - which must be enclosed)**

**STATEMENT TO BE COMPLETED AND SIGNED BY NOK/
PARTNER/PARENT/GUARDIAN**

(a) Total annual income from all sources

		Name/relationship		Name/relationship
(i) Earned	£		£	
(ii) From Pension	£		£	
(iii) From Investments	£		£	
(iv) From Other Sources	£		£	
Total	£		£	

(b) Occupation NOK/Partner/Parent

(c) Number, sex, age and relationship of those dependent on applicant/NOK/Partner/Parents or Guardian

**I HEREBY DECLARE THAT THE ABOVE STATEMENTS ARE TRUE AND COMPLETE AND THAT NO
ITEM OF INCOME HAS TO THE BEST OF MY KNOWLEDGE BEEN OMITTED.**

Signature of NOK/partner/parent/guardian

The Applicant must attach a full personal statement giving the reason for needing financial assistance, with an account of his, or her, particular interests including social activities and any outstanding qualifications, which specially support his/her application.

I hereby declare that my application, references, financial statement and personal statement are true to the best of my knowledge.

Date

Signature of Applicant

**STATEMENT BY INDEPENDENT PERSON RECOMMENDING A GRANT AND
VERIFYING THIS APPLICATION (not related to applicant)**

Signature

Qualification

Address

Date

FINANCIAL STATEMENT

Annual Cost of the Course of Study, (please attach a separate sheet if required) itemising:

(a) Fees.....	£
(b) Maintenance:	£
(i)Term time home/ lodgings/rent/mortgage/Council Tax.....	£
(ii) Vacation home/lodgings/ rent/mortgage/Council tax.....	£
(c) Expenses (travel, books, child maintenance/ insurance/phone/TV/leisure/ loan payments/ credit cards).....	£
(d) Utility bills (gas, water, electricity etc).....	£
(e) Other outgoings.....	£
Total Annual Expenditure	£

Total Annual Funds per annum to meet expenditure itemized below:

(a) From Scholarship, loans, or other grants in aid, etc. (enclose evidence of amounts, nature of award and years available)	£
(b) From partner/NOK/parents (state minimum amount of assistance that can be given)	£
(c) From any other source e.g. friends, relatives, private income, savings or earnings (give details)	£
Total Annual Income	£