Clackmannanshire Educational Trust

Application for Grant

Section 1 - Applicant's Personal Details

Full Name			
Address			
Email address			
Telephone number			
Date of Birth			
Marital status			
Name, relationship			
and age (if under 18))		
of other family			
members in the			
household	(04.1		1 4 1 24
=	ne age of 21 please er	isure that Section 6 is	s completed with
parental income deta	ails.		
Section 2 - Resider	nce		
How long have you b	peen a resident of		
Clackmannanshire:			
Section 3 – Educati	ion		
Coolion o Eddodi	.0.1		
Name of the last sec	condary cohool		
attended	oridary scribbi		
Dates if attendance			
Dates il atteridarios			
Qualifications			
Qualifications			
Voor Cubicot or	: Modulo	Level (eg Nat5)	Grade/Band
Year Subject or	Module	Level (eg maio)	Graue/Dariu

Please complete and return this form to education@clacks.gov.uk or Education, Clackmannanshire Council, Kilncraigs, Greenside Street, Alloa, FK10 1EB. For enquiries call 01259 45 2499.

Educational establishments attended since leaving school

Name of establishment	From	То	Course Title (full time or part time)	Qualification gained
Section 4 – Natu	re of App	licatior	1	
Course/subject to	be studie	d		
University/College	to be			

(mileage and cost per week) Section 5 – Special Circumstances

Give details of any special circumstances which you wish to draw to the attention of the committee.	
Have you applied to any other body for financial assistance? If so give details.	

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attended

only)

course

Duration of course

Mode of attendance

(include dates from and to)

(full time, part time, open learning, remote learning

Travel necessary for the

Section 6 – Income for Previous Financial Year

Income	Applicant (and Parents if under the age of 21)	Other members of household e.g. Parent, spouse, partner
a. Income from employment. State employer's name, address, email address, telephone number and have amount certified by employer.		
b. Pensions including retirement pensions etc.		
c. Child benefit		
d. Sickness, unemployment, Tax Credits, Universal Credits etc.		
e. Interest on shares, bank interest etc.		
f. Any other income, give details.		
2. Charges on income		
a. Interest paid loans, bonds, mortgages (do not include capital repayment)		
b. Superannuation contribution.		
c. Premium on life insurance policies or retirement annuity contracts.		
d. Other annual charges (excluding rent and council tax)		
council tax)		

Section 7 - Grant

Purpose of Grant (see guidance notes) give brief description	
Value of Grant applying for in pounds (£)	

Section 8 - Applicants Declaration

I certify that to the best of my knowledge and belief the statements contained in this application are full and correct in every respect.

Signed (by	Date	
applicant)		

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Section 9 - Certificate by Employer

Name of company	
Applicants supervisor/manager	
Address of company	
Email address	
Telephone number	
Employee's Occupation and payroll	
number	
If employed for less than 12 month	
give start date	
Gross salary per month	
Bonus, overtime (average per month)	
Signature on behalf of employer	
Name	
Job Title	
Telephone number	
Email address	
Date of signature	

Employers stamp	

Section 10 - Referees

Include 2 referees written statements to support the application giving such information as the length of time known to applicant, character of applicant, opinion on whether course, travel, research etc. is appropriate and will benefit the applicant.