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| Rutland County Council - Emma Molesworth TrustFunding Application for Short Courses |

The decision of the Board whether to grant an award or not is final, there is no opportunity to appeal against the decision

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| **YOUR DETAILS**  Title (Miss / Mr / Ms / Mrs) .…….. | Address (where you are normally resident in the county of Rutland)  ………………………………………………………….. |
| Forename(s) ……………………………………………………………  Surname | ………………………………………………………….. |
| ……….…………………………………………………. | ………………………………………………………….. |
| Date of Birth day month year  / / | ………………………………………………………….. |
|  | Postcode………………… Tel. No…………………… |

|  |  |  |
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| **1. COURSE PROVIDER**:  / /  / /  Name and address  ……………………………………………  ……………………………………………  Tel No:…………………………………..  Contact:…………………………………. | **COURSE DETAILS:**  Full title of course:  …………………………………………….  Please give brief course content:  …………………………………………….  ……………………………………………. | Course start date  Course end date |

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| **2. COURSE PROVIDER**:  / /  / /  Name and address  ……………………………………………  ……………………………………………  Tel No:…………………………………..  Contact:…………………………………. | **COURSE DETAILS:**  Full title of course:  …………………………………………….  Please give brief course content:  …………………………………………….  ……………………………………………. | Course start date  Course end date |

Method of payment. Grants are normally paid direct to the education establishment.

Please tick here ( ) if you wish it to be paid otherwise and provide details:

………………………………………………………………………………………………………………………………………….

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| **Declaration:**  I confirm that the information provided is accurate and complete and that no other funding is being claimed. Any funding awarded will be spent solely for the purpose specified. Should I withdraw from the course, funding will be repaid pro-rata for the course days remaining.  Signed……………………………………………*(Applicant)*  Date…………………………………… | Course Fee 1. £…………..  Course Fee 2. £…………..  Exam Fee 1. £………….  Exam Fee 2. £………….  General Course  Related expenses £…………. | Official Use Only  £ \_\_\_\_\_\_\_\_\_  £ \_\_\_\_\_\_\_\_\_  £ \_\_\_\_\_\_\_\_\_  £ \_\_\_\_\_\_\_\_\_  £ \_\_\_\_\_\_\_\_\_ |

To help the trustees understand who benefits from the Trust, please provide some additional information about yourself. (This will be recorded anonymously and will not be used to assess your application).

*Please tick all the boxes that apply to you*

**Employment**

|  |  |  |
| --- | --- | --- |
|  |  | I am unemployed |
|  |  |  |
|  |  | I work full-time in agriculture |
|  |  |  |
|  |  | I work part-time in agriculture |
|  |  |  |
|  |  | I work in a non-agricultural setting |
|  |  |  |
|  |  | I am self-employed |
|  |  |  |
| **Previous learning/qualifications held** | | |
|  |  |  |
|  |  | No qualifications |
|  |  |  |
|  |  | Up to 4 GCSE’s/GCE ‘O’ levels |
|  |  |  |
|  |  | 5 GCSE’s/GCE ‘O’ levels Grade A-C/NVQ level 2 |
|  |  |  |
|  |  | A-level/OND/Advanced GNVQ/ NVQ level 3 |
|  |  |  |
|  |  | HND/degree/NVQ level 4 |
|  |  |  |
|  |  | Post graduate qualification/NVQ level 5 |
|  |  |  |
|  |  | Job-related qualification(s)/certificate(s) |

How did you hear about the Emma Molesworth Trust?

**Please return this application form to: Emma Molesworth Trust, Services for People Directorate, Rutland County Council, Catmose, Oakham, Rutland, LE15 6HP**

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| For Office Use Only |  |  |  |
| **Rutland Resident**  **YES/NO** | **Eligible Course**  **YES/NO** | **50% of Fee**  **£** | **Letter and Cheque Request issued**  **Date:** |
|  |  |  |  |
| **Checked by**  **Date:** | **Authorised by**  **Date:** | **Letter signed by**  **Director and sent**  **Date:** |  |