

ALDERMAN NEWTON'S EDUCATIONAL FOUNDATION (BEDFORD)

APPLICATION FOR GRANT

*******Please read the Guidance Notes before completing this form*******

APPLICANT

1.	Full name	(male/female <i>(please delete as appropriate)</i>)
2.	Date of Birth	
3.	Current address in the Borough of Bedford	
4.	Telephone number	
5.	Email address	
6.	Have you applied to the Foundation before? If so, please provide the address you gave, if different from your current address	
7.	Have you lived at the above address for three years or more? If not, please give your previous address	
8.	How long have you been a resident of Bedford? (A minimum of three years will normally be required – you may be asked to provide more information on your residency)	
9.	Details of any earned income for the last 12 months (see note (i) below)	
10.	What other sources of financial support are you receiving/will you receive	

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11.	Ethnic Background (<i>Please tick as appropriate</i>):	
	White	<input type="checkbox"/>
	Mixed/multiple ethnic groups	<input type="checkbox"/>
	Asian/Asian British	<input type="checkbox"/>
	Black/African/Caribbean/Black British	<input type="checkbox"/>
	Other ethnic group	<input type="checkbox"/>
12.	Please give details of any disability	

DETAILS OF ASSISTANCE SOUGHT

13.	Name and address of School, College or University (see Notes (iii) and (iv) below)	
14.	College or University course title or subjects studied at School	
15.	Please give details of books/equipment/materials required and costs (see note (iv) below)	Please attach separate sheet
16.	Please state and provide evidence (if available) of whether the items referred to in 15 above are a requirement of the course or desirable additional items	
17.	Have you or a member of your family received an award from the Foundation in the past? If so, please state the date and the amount of the award.	

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DETAILS OF PARENTS OR GUARDIANS

18.	Full name(s)							
19.	Address							
20.	Relationship to candidate							
21.	Are you eligible for Free School Meals? (please indicate as appropriate)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">Yes</td> <td style="width: 15%;"></td> <td style="width: 70%;">Please provide evidence from your school and proceed to sign this form overleaf (do not complete questions 22 -24)</td> </tr> <tr> <td style="text-align: center;">No</td> <td></td> <td>Please continue to complete the remainder of the application form (from question 22 onwards.</td> </tr> </table>	Yes		Please provide evidence from your school and proceed to sign this form overleaf (do not complete questions 22 -24)	No		Please continue to complete the remainder of the application form (from question 22 onwards.
Yes		Please provide evidence from your school and proceed to sign this form overleaf (do not complete questions 22 -24)						
No		Please continue to complete the remainder of the application form (from question 22 onwards.						
22.	Please give details of: (see note (i) below)							
	(a) total gross household income							
	(b) commissions (if any)							
	(c) bonuses (if any)							
	(d) pensions (if any)							
	(e) Investments (if any)							
	(f) benefits received (if any) (please give detailed information of the type and amount of any benefits received.)							
23.	Please state how many people are in the household							
24.	Please state how many people in the household are in any employment							

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SIGNATURE

This form should be completed and signed by a parent or guardian in the case of a candidate who normally resides at their address or is dependent on them.

In other cases, the applicant should sign.

I confirm that the information contained in this application is accurate and complete.

Signed
Parent/Guardian/Applicant – *please delete as appropriate*

Date

PLEASE ENCLOSE

- (i) Income Tax Certificate of Pay and Tax deduction (form P60) or other proof of earning if self employed in support of answers to questions 9 and/or 23.
- (ii) A statement concerning the candidate's character from the School, University or other place of learning previously or now being attended.
- (iii) A letter of acceptance from a University or other place of learning.
- (iv) A list of books/equipment/materials for which funding is sought and written confirmation from the university or establishment whether the items are essential to the course or desirable.

PLEASE RETURN TO:

The Clerk to the Trustees
c/o Democratic & Registration Services
Room 323
Borough Hall
Cauldwell Street
Bedford
MK42 9AP

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University or College advice

NAME OF APPLICANT:

BOOKS:

Essential for the course:

<u>TITLE</u>	<u>AUTHOR</u>	<u>PRICE</u>

Desirable:

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OTHER EQUIPMENT RECOMMENDED:

PLEASE MARK ESSENTIAL OR ADVISABLE

DESCRIPTION OF EQUIPMENT

COST

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