

**JOHN WESTON STRETTON OF KIDDERMINSTER CHARITY
GRANT AWARD APPLICATION (Registered Charity No. 1152222)**

ALL SECTIONS MUST BE COMPLETED BEFORE SUBMISSION

1. First Names		Surname	
2. Date of Birth		(enter as e.g. 08.05.94)	
3. ADDRESS - HOME		ADDRESS - TERM TIME (IF DIFFERENT)	
Post code:		Post code:	
Email address:		Email address:	

4. SCHOOLING	DATES

6. EXAMINATION RESULTS (include G.C.S.E./A-levels, vocational equivalents and any later qualifications). Begin with the most recent.

SUBJECT/COURSE	LEVEL (e.g. GCSE / BTEC)	GRADE ACHIEVED	DATE ACHIEVED	SUBJECT/COURSE	LEVEL (e.g. GCSE / BTEC)	GRADE ACHIEVED	DATE ACHIEVED

7. CONTRIBUTION TO SCHOOL LIFE Please give details of any activities, fund raising, sporting or otherwise, in which you were involved at your school.

8. If you are now in full time employment, what is your present occupation?

9. If you are or will be attending College or University please answer the following:-

a) Name of College/University:

b) Please ensure the completion of the 'Certificate of Attendance' on page 3 of this document.

c) When does/did the course start?

Month:

Year:

When does the course end?

Month:

Year:

d) What subject(s) will you study?					
e) What qualification will you receive?					
f) Please state whether you are residential or living at home					
g) Will you have any other source(s) of financial assistance?	NO		YES		How much?
Source of funds:					

10. PREVIOUS AWARDS FROM THIS TRUST. Please list amounts of any previous awards from:	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5
	£	£	£	£	£
	£	£	£	£	£
	£	£	£	£	£

OTHER TRUSTS/AWARDING BODIES. Please name below:					
1.	£	£	£	£	£
2.	£	£	£	£	£

Please keep a record of any awards received to ensure that the above information is correct, otherwise your application may be discounted.

11. EDUCATION OR FURTHER EDUCATION GRANT If you are in receipt of normal sources of student funds these are intended to cover normal student expenses. As there is considerable demand for the Charity's funds, it is MOST IMPORTANT for you to set out in detail below any special expenses or financial needs you consider you have. Your application will not be considered if this part of the form is left blank and if you fail to sign section 15.

Please set out on a separate sheet an outline of your annual expenditure including: Board and Lodging, Travel, Books, Societies etc.

12. If this is your first application please indicate why you wish to follow a career in medicine

13. I make application for a Scholarship from the above Charity and declare that all the foregoing information I have given is true and I have not knowingly withheld any relevant information, and that I understand that any false statement contained in this application form may deprive me of all benefits from the Charity. I will immediately inform The Clerk to The John Weston Stretton of Kidderminster Charity, in writing, if I withdraw from the course noted in 9. c) overleaf.

14. PLEASE RETURN THIS FORM TO: CLERK TO THE JOHN WESTON STRETTON OF KIDDERMINSTER CHARITY
c/o ADAM HOUSE, BIRMINGHAM ROAD, KIDDERMINSTER, DY10 2SH

15. Date:	Signature of Candidate:
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The John Weston Stretton of Kidderminster Charity – CERTIFICATE OF ATTENDANCE

Mr J S C Quinn
c/o MFG Solicitors LLP
Adam House
Birmingham Road
Kidderminster DY10 2SA
Email: jim.quinn@mfgsolicitors.com

To: **The** John Weston Stretton of Kidderminster Charity – a registered Charity No: 1152222
c/o The Clerk, Mr J S C Quinn, of the above address.

I HEREBY CERTIFY that: (insert name)

is a student in full/part time education at the University/College (delete as appropriate) known as:

..... (insert institution name)

Signed: (sign here)

Name: (print name)

Position: (print job title/position)

Apply University/College stamp here:

Date:

For completion by student applicant:

I authorise you to provide this information to the John
Weston Stretton of Kidderminster Charity.

Signed: Date: