

CONFIDENTIAL

The RSCM is an educational charity. We are fortunate in having some limited funds available to help course participants whose financial situation would prevent them from attending. Currently, bursaries of up to 50% of the course fee are available for children and others in full time education, and for overseas members attending courses in the UK.

Please complete a separate form for each applicant. Print out the form and complete all sections in BLOCK CAPITALS, then send as soon as possible, or together with your course booking form, to:

RSCM Education Administrator, 19 The Close, Salisbury, SP1 2EB, UK

Participant details

Title: First Name: Last Name:

Address:

..... Postcode/Zip: Country:

Telephone: Email:

Date of Birth:

Are you a member of the RSCM? Member of affiliated choir Individual/Student/Junior Friend

Name of church/choir:

Course details

RSCM course for which you are applying:

Date: Full fee:

Statement in support of the application

Please give your reasons for requesting financial assistance. *(For example: you are a student in receipt of a grant or loan, or you receive no financial support from your parents; there are family circumstances which affect your or your parents' ability to make the full payment, eg unemployment, total family income is low, you or they are recipients of benefits. Please list any other reasons why you need financial help to attend the course.)*

.....
(continue overleaf if necessary)

.....
.....
.....
.....
.....

CONFIDENTIAL

Referees

The application must be supported by two independent referees, at least one of whom is familiar with the course participant's involvement in church music (past or present), and at least one of whom should be familiar with their personal circumstances. Suitable referees would include a minister or parish priest, worship leader, teacher, tutor or choir trainer.

Referee 1

Name: Position:

Address:

..... Postcode/Zip: Country:

I recommend (name) for a bursary from the RSCM's charitable funds.

Signed: Date:

Referee 2

Name: Position:

Address:

..... Postcode/Zip: Country:

I recommend (name) for a bursary from the RSCM's charitable funds.

Signed: Date:

Signed: Name:
(Parent/guardian if under 18): (please print)

Date:

For office use only:

Course applied for:

Grant awarded: Yes / No Amount: Date: