

# MOUNTSORREL EDUCATIONAL FUND

Grant Application Form

University Level

## STUDENT'S DETAILS

Full Name:					
Home Address: (incl. postcode)				Term Time Address:	
Date of Birth:		Age:		Telephone Number:	
Email Address:					
Period of residence in Mountsorrel:			years	months	
Marital Status:				no. of dependent children:	
Total of Salary, Grant, Sponsorship or other income (excluding Student Finance):					£
If a grant is awarded, it will be paid direct to the applicant's bank account. Please provide details here:					
Name on account:					
Account Number:				Sort Code:	

## UNIVERSITY COURSE

University:					
Course:			Date of starting course:		
Year of Study:		Length of course:	years	Full/Part Time:	

## STUDENT DECLARATION

I confirm that I have answered the above questions truthfully and to the best of my ability			
Student's Signature:		Date:	
<i>SHOULD YOU FEEL THERE IS ANY ADDITIONAL INFORMATION OR CIRCUMSTANCES WHICH MAY AFFECT YOUR APPLICATION PLEASE PROVIDE DETAILS OVERLEAF.</i>			

## UNIVERSITY CONFIRMATION *(for completion by university staff only)*

I confirm that the above student is studying the stated course at this university	Official University Stamp:
Tutor's Signature:	
Date:	

**THIS FORM IS STRICTLY CONFIDENTIAL AND FOR THE USE OF THE TRUSTEES ONLY**

*Once completed please return this form to:*

*CLERK TO THE TRUSTEES: Liz Resch, 4 Rothley Road, Mountsorrel, Loughborough, LE12 7JU*