

**Treasurer**

Mrs Ann Lutley
18 High Street
Flitwick
Bedfordshire
MK45 1DS
Email: ann@rlutley.myzen.co.uk
Tel: 01525 712837

Trustees

Mr Paul Cranmer - Chair
Mrs Ann Lutley
Mrs Sheila Smith
Mrs Catherine Hursthouse
Revd Claire Harald

Nicholas Hursthouse Education Grant - Application Form

To apply for an Education grant please complete this form and return it with verification of your university/college or apprenticeship registration to the Treasurer of the Trustees at the address above by **30th September 2024**.

DATA PROTECTION: The following information will be treated as confidential. The questions are to enable the trustees of the charity to ensure that applicants are eligible for an award, so that funds are distributed as fairly as possible. None of the details given will be disclosed beyond the trustees of the Charity. Your details will be held on record for 12 months.

SURNAME _____ FIRST NAME/S _____

ADDRESS IN FLITWICK _____

E MAIL _____

DATE OF BIRTH _____ TELEPHONE NUMBER _____

Are you a university student going into your second year of degree studies? **Yes/No**

University _____ Course _____

Course Start Date _____ Duration Of Course _____

Are you an apprentice? **Yes/No**

Name of Employer and College attended _____

Duration of Apprenticeship _____

IMPORTANT: Please note we cannot consider applications that do not show that the applicant has been admitted to the second year of study, (such as a copy of your completed second year university registration/ college registration) or details of your employer/apprenticeship scheme.

If your application is successful, would you like to receive a **cheque** or **direct payment** (please circle your choice). In the case of direct payment, please supply your account details below. Please ensure that the account name matches your account details. These details will be kept until payment has been made and receipt verified.

DECLARATION: *I declare that the personal details given by me are correct, that I have not previously been awarded an Education Grant and that I will refund a proportion of the grant if I leave my course of study.*

SIGNED _____ DATE _____

DIRECT PAYMENT DETAILS.

Sort Code : _____ - _____ - _____ Account Number: _____

Account Name: _____

The Flitwick Combined Charities comprise the Town Lands Charity, Poors Moors and Deacons Dole. Registered Charity Number 233258