

CHIPPING SODBURY ENDOWED SCHOOL FOUNDATION CHARITY NO: 311700

**PUPILS ARE INVITED TO APPLY FOR FUNDING FOR THEIR
FURTHER EDUCATION/APPRENTICESHIP COURSES (NO MEANS TESTING)**

**PLEASE COMPLETE THE DETAILS BELOW TO RECEIVE YOUR GRANT SUBJECT TO
MEETING THE CRITERIA MARKED (*)**

<u>PERSONAL DETAILS:</u>	
SURNAME:	FIRST NAMES:
ADDRESS:	
DATE OF BIRTH:	AGE:
	(* MAXIMUM AGE TO CLAIM 25YRS)
<u>SECONDARY EDUCATION:</u>	
NAME OF SCHOOL:	
DATE OF ENTRY:	DATE OF LEAVING:
(*YOU MUST HAVE ATTENDED CHIPPING SODBURY SCHOOL FOR A PERIOD OF OVER 2 YRS)	
FURTHER FULL TIME EDUCATION OR APPRENTICESHIP AFTER LEAVING SCHOOL:	
BRIEF STATEMENT ON PURPOSE FOR WHICH GRANT IS SOUGHT:	
PLEASE GIVE DETAILS OF PREVIOUS GRANTS RECEIVED FROM THIS FOUNDATION:	
PLEASE RETURN COMPLETED FORMS TO:	
MRS F THORNTON CLERK TO CHIPPING SODBURY ENDOWED SCHOOL FOUNDATION 32 OLD READING ROOMS CLOSE DIDMARTON GLOUCESTERSHIRE GL9 1DS	

**GRANTS WILL BE PAID FOR THE CURRENT ACADEMIC YEAR ONLY
GRANTS WILL BE PAID ON 3 DATES:- 1ST OCTOBER, 10TH JANUARY, 20TH MARCH**

**PLEASE NOTE THAT AN APPLICATION CAN BE MADE FOR EACH YEAR YOU MEET THE
CRITERIA.**

A NEW APPLICATION IS REQUIRED FOR EACH YEAR.

**(*)YOU MUST INCLUDE WITH YOUR APPLICATION EVIDENCE OF ACCEPTANCE TO YOUR
COURSE OR EVIDENCE OF PROGRESSION TO YOUR NEXT YEAR OF STUDY**