



SCHOLARSHIP APPLICATION

1. PERSONAL DETAILS

Full Name: _____ **Date of Birth:** _____ **Age:** _____
Marital Status: _____ **NI Number:** _____
Telephone: _____ **Mobile Number:** _____ **Email:** _____
Full Address & Post Code: _____

2. SERVICE CONNECTION

Please enter details of the individual with the military service:

Full Name: _____ **Date of Birth:** _____ **Service Number:** _____
NI Number: _____ **Date of Death:** _____ **Email:** _____
Rank: _____ **Relationship to Applicant:** _____
Service Type: _____ **Enlistment Date:** _____ **Discharge Date:** _____
Engagement Type: _____
Regiments: _____
Surname while serving: _____

3. HOUSEHOLD

Please enter the details of all members of your family household:

Name	Age	Relationship to applicant	Occupation/ Education	Earnings	Household Contribution

4. EDUCATION & EMPLOYMENT

Please give us details of your education/employment history for the last 5 years:

- 1)
- 2)
- 3)
- 4)
- 5)

Please give us the details of the course you are applying for or are currently studying:

Institution Name: **Course Name:** **Full/Part Time:** Enter text.

Start Date: **End Date:** **Course Fees:**

Accommodation Costs: **Other Costs:**

Please list any grants, student loans or other funding applied for or received:

Applied to	Amount	Outcome

5. SUPPORTING EVIDENCE

Please provide two referees who have known you for at least two years:

Referee 1	Referee 2
Name:	Name:
Address:	Address:
Email:	Email:
Relationship to applicant:	Relationship to applicant:

Please tell us how you found out about the President's Award Scheme:

What value of scholarship are you applying for (max £1,500) and what would it be used for? If applying for the maximum value this is generally only awarded to assist with accommodation fees:

6. HOUSEHOLD FINANCIAL DETAILS

ALL THE INFORMATION REQUESTED IN THIS SECTION IS A LEGAL REQUIREMENT. Please include all household income, benefits and expenses:

Monthly Income - Applicant		Monthly Expenditure - Applicant		Comments
Earnings from employment:	£	Rent/Mortgage	£	
Student loan/grant	£	Council Tax	£	
Any other income	£	Housekeeping:	£	
		Insurance premiums:	£	
		Television packages/mobile phones, internet and telephone	£	
		Utility bills: gas, electric, heating oil, water rates, council tax	£	
		Transport Costs:	£	
		Other:	£	
TOTAL INCOME	£	TOTAL EXPENDITURE	£	

Parents/Guardians Income vs Expenditure:

Father/Guardian's Name		Occupation	
Mother/Guardians Name		Occupation	

Monthly Income – Parents/Guardians		Monthly Expenditure – Parents/Guardians		Comments
Salary	£	Rent/Mortgage	£	
Maintenance CSA	£	Council Tax	£	
Service Pension	£	Housekeeping	£	
Service Invalidity Pension	£	Insurance premiums	£	
War Disability Pension	£	Television packages/mobile phones, internet and landline	£	
Widows Pension/ Bereavement Allowance	£	Utility bills: gas, electric, heating oil, water rates	£	
Occupational Pensions	£	Loan Payments	£	
JSA, IS, ESA	£	Credit Cards	£	
Disability Related Benefits	£	Car/Transport Costs	£	
Family/Child Related Benefits	£	Other	£	
Other	£	Other	£	
TOTAL INCOME	£	TOTAL EXPENDITURE	£	

Please list all savings and investments:

	Applicant	Parents/Guardian
Bank Account	£	£
Building Society	£	£

Premium/Investment Bonds/ISA	£	£
Military pension lump sum/ Resettlement/redundancy payments (please specify)	£	£
Investment income	£	£
Total	£	£

7. PERSONAL STATEMENT

Please insert, in the box below, details of why you are applying for this scholarship and how, if a scholarship was awarded, the funds would assist you:

8. DECLARATION

- I declare that the information I have given on this form is, to the best of my knowledge, correct.
- I understand the information I have provided will be used to process this application for assistance.
- I agree that the details on this form may be passed in confidence to other agencies, including other charities in the course of this application.
- I authorise the Royal British Legion Women's Section to approach the relevant Service Records Departments to confirm submitted service details.

I, THE APPLICANT, AGREE WITH THE ABOVE STATEMENTS

SIGN: DATE:

I/WE THE PARENT(S)/GUARDIAN(S), AGREE WITH THE ABOVE STATEMENTS:

SIGN: DATE:

SIGN: DATE: