

Teachers Bursary Application Form

PERSONAL DETAILS	
First name(s)	
Surname	
Title (e.g. Mr/Mrs)	
Date of Birth (dd/mm/yyyy)	
Nationality	

ADDRESS	
Street Address	
City & County/State	
Postcode/Zip Code	
Country	

CONTACT DETAILS	
E-mail Address	
Telephone	
Mobile	

TEACHING	
Name of school/college you work at	
Job title	
Number of students at school/college	
Number of students studying an art subject	
Age range you teach	
Does your school have Artsmark Award?	Yes No

HOW DO YOU ANTICIPATE YOUR 2ND CHOICE COURSE WILL BENEFIT?

(max 250 words)

YOUR CREATIVE PRACTICE:

YOUR TEACHING PRACTICE:

YOU PERSONALLY:

DECLARATION

Please carefully read the following statements and sign below to indicate acceptance of these terms.

- *I declare that the above details are true to the best of my knowledge. I undertake to provide any additional information that may be required.*
- *I confirm that my financial need is genuine*
- *I understand that offered bursaries are subject to Terms and Conditions.*
- *I consent to my application data being shared with the College's Grants Committee and members of staff in the Academic Office on a need-to-know basis.*
- *If successful I agree to complete and return the impact statement with three digital images within 60 days from the course*

Please also check the College's Data Protection Statement on the website and on the Student Intranet

Name

Date

Signature

Please send your completed application form to:

Academic Registry, West Dean College of Arts and Conservation, Chichester, West Sussex, PO18 0QZ

Telephone 01243 818291

Email college@westdean.org.uk

www.westdean.org.uk