

**Bursary Application Form**

Application closing date – 31st August 2017

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| **Student details** | | | |
| **Name** |  | | |
| **CQ candidate number** |  | **Centre** |  |
| **Address** |  | | |
| **Postcode** |  | **Telephone Number** |  |
| **Email** |  | | |
| **Date of birth** |  | **Authorised Signature** |  |

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| **Please provide the following information:** |
| List previous and current employment, with dates, briefly detailing present employment, to include the name and address of the organisation/practice |
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| Briefly state your involvement in any activities or studies outside your immediate employment relevant to your application and Veterinary Nursing |
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| Briefly outline the purpose for which the bursary is required and reasons why the selection panel should award the bursary to you |
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| Please state if you are in receipt of any other bursaries or funding to support your training |
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**CQ – office use only**

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| **Date received** |  | **Action taken** |  |
| **Signature** |  |