
Bursary Application Form

String Ensemble Course with the Chilingirian Quartet,
Wednesday 15 April – Sunday 19 April 2020

Bursaries are offered by West Dean College, to current music students and early career young professional musicians, Application deadline: 28 February 2020

PERSONAL DETAILS	
NAME OF YOUR QUARTET or ENSEMBLE:	
First name(s):	
Surname:	
Title (e.g. Mr/Miss):	
Date of Birth (dd/mm/yyyy):	
Nationality:	

CONTACT DETAILS	
E-mail Address:	
Telephone:	
Mobile:	

ADDRESS	
Street Address:	
City & County/State:	

Postcode/Zip Code:	
Country	

Disability – please provide details or supply a letter with this application form and your support requirements	
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HAVE YOU ATTENDED A WEST DEAN SHORT COURSE BEFORE?	
IF YES, PLEASE STATE SUBJECT AND DATE	

PLACE OF STUDY (OR DETAILS OF MOST RECENT STUDY):	
CURRENT/MOST RECENT PLACE OF STUDY:	CURRENT TUTOR:
COURSE:	CONTACT TEL:
PREVIOUS PLACE(S) OF STUDY:	CONTACT EMAIL:
	PAST TUTOR(S)
COURSE:	

<p>WHY DO YOU NEED FINANCIAL SUPPORT TO JOIN THE COURSE?</p> <p>Please indicate how much assistance you would need to enable you to attend.</p> <p>A minimum contribution of £125 per student is expected.</p>

ARE YOU APPLYING TO OTHER FUNDING SOURCES FOR THE BALANCE OF FEES?

HOW LONG HAS YOUR ENSEMBLE BEEN PLAYING TOGETHER?

WHAT ARE THE FUTURE PLANS FOR YOUR ENSEMBLE AND YOU PERSONALLY?

(max 250 words)

YOUR ENSEMBLE:

YOUR CURRENT STUDIES:

YOU PERSONALLY:

GIVE DETAILS OF YOUR CURRENT REPERTOIRE:

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DETAILS OF YOUR MOST RECENT GRADE/QUALIFICATIONS:			
DATES	NAME OF COLLEGE/UNIVERSITY ATTENDING/ATTENDED	NAME OF COURSE/SUBJECT	QUALIFICATION GAINED/STUDYING/DATE RESULTS EXPECTED

WHY DO YOU WISH TO ATTEND THE CHILINGIRIAN COURSE THIS YEAR AND WHAT ARE YOUR FUTURE CAREER PLANS FOR YOUR ENSEMBLE?

Please include or email a DVD/YouTube video recording of your playing AND any other information you believe to be relevant to your application, if you are not already known to one of the tutors.
 Supplied [] please tick

DECLARATION
<p>Please carefully read the following statements and sign below to indicate acceptance of these terms. All applicants whether successful or not, will be notified of the result by mid-March 2020.</p>

- *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 understand that if offered a bursary, but are unable to attend the course for any reason no alternative award will be offered. All bursaries are awarded at the absolute discretion of West Dean College. Any decisions made are final and cannot be appealed.*
- *If offered a bursary, I will make myself available to assist in the recruitment and promotional activities of the College as outlined in the 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 within 60 days from the course*

Please also check the College's Data Protection Statement on the website.

Name:	
Date:	
Bursary Applicants Signature:	

Send your completed application form to:
Academic Registry, West Dean College, Chichester, West Sussex, PO18 0QZ, UK

Telephone 01243 818291 Email college@westdean.org.uk www.westdean.org.uk

For office use only

Date received:
