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| **LIRONI TRAINING FUND APPLICATION****SONS & DAUGHTERS BURSARY** |
| **PURPOSE OF FUND**The Lironi Training Fund to provide bursaries for the sons and daughters of horticulturists was set up to promote the profession of horticulture by helping people likely to make long term careers in horticulture obtain professional qualifications. It is intended to provide an element of counter balance to relatively low incomes in horticulture which may affect both student choices and the ability of working/retired horticulturists to assist their children whilst studying. |
| **1. APPLICANT DETAILS**Title: .......... First Name: ........................................ Surname: .....................................Address: ........................................................................................................................... ............................................................. Post Code: .....................................Contact Tel No.: .................................................... Email: ................................................Date of Birth: .................................................... Marital Status: .....................................Date of Birth of Any Dependent Children: ......................................................................................................................................................................................................................  |
| **2. COURSE DETAILS**Title of Course: .................................................................................................................Start Date: .......................... Finish Date: ........................ Full/Part Time: ..............................................................................................................................................................(Please give brief details i.e. No. of days/week and any placements etc.)Name of College: ....................................................................................................................Address of College: .................................................................................................................Resulting Qualification: ......................................................................................................**Cost of Course** Fees: £....................... Accommodation: £........................**Per Annum**  Course Costs: £...................... Other: £........................ (books, equipment etc.) (please state)......................................... Travel Costs: £............................ **Total:** £........................ |
| **3. OTHER QUALIFICATIONS**Please give details of any other qualifications you have................................................................................................................................................................................................................................................................................................. |
| **4. OTHER BURSARIES OR GRANTS**Please give details of any other grants or bursaries you have applied for and/or received from other organizations including the amount awarded, if known................................................................................................................................................................................................................................................................................................. |
| **5. OTHER FUNDING FROM PERENNIAL**Please give details of any other grants or payments received by Perennial for any reason................................................................................................................................................................................................................................................................................................. |
| **6. EDUCATIONAL FUNDING**Please give details, including amounts, of any state funding you receive or will receive e.g. Education Maintenance Allowance, Student Loan etc.................................................................................................................................................................................................................................................................................................Have you applied for a Student Loan? Y / N If Yes please give details including outcome if known:................................................................................................................................................................................................................................................................................................ |
| **7. PERSONAL FINANCES**Please give details of any other form of income e.g. part time work, income from savings etc., if you live with a partner or spouse, please include brief details of their income as well as your own...................................................................................................................................................................................................................................................................................................*If the costs of studying exceed your income, please tell us how you intend to meet the shortfall?*.................................................................................................................................................................................................................................................................................................. |
| **8. DETAILS OF WHERE YOU WILL LIVE DURING THE COURSE**With Parent Shared flat/houseWith Partner/Spouse Own flat/houseHalls of Residence Other (please state) |
| **9. EMPLOYMENT HISTORY IF APPLICABLE**Employer/Job Title/Date(s)................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................ |
| **10. ADDITIONAL INFORMATION TO SUPPORT APPLICATION**We are looking for evidence to support your commitment to horticulture. Please submit a short report (no more than 300 words), which explains why you have chosen the course and what benefit you expect to gain from it. You may also wish to include details of any relevant voluntary work, prior study etc in your submission. If you wish to include a third party reference, please enclose it with this application (this is not essential). Continue on a separate sheet if necessary. ***NOTE: This submission will be form a major part of the selection process if funding is limited***................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................*We reserve the right to ask you to supply further information. Applicants may be invited to attend an interview with the Training Committee.* |
| **11. Data Protection**The information you provide in this application form will be held and processed by Perennial in accordance with the Data Protection Act 1998 and will be used by Perennial to carry out grant processing, analysis, auditing and accounting. In order to reach a decision we may need to discuss or verify the information on this form with other organizations however, we need your consent to do this. By completing this form you are giving your consent to Perennial to approach other relevant organizations for information about you and your course. We will usually notify you before we approach a third party.I confirm that the information I have given is true to the best of my knowledge and belief at the time of making this application.Signed .......................................................................... Date: .....................................***Send completed forms to:*** ***Perennial, 115-117 Kingston Road, Leatherhead KT22 7SU 01372 373962*** |
| ***NOTE:*** This form must be completed in all cases i.e. if the applicant is no longer dependent upon parents. If parents are living apart please complete two separate forms.  |
| **12. PARENT’S DETAILS****Completed by** (please delete as appropriate): **Mother and Father Father only Mother only**Name: ...........................................................................................................................Address: ........................................................................................................................... ...........................................................................................................................Tel/Mob No.: ................................................. Email: ...............................................Currently In Employment: Y / NHorticultural Background (Please provide details of employment history in horticulture):***Date from – to******Employer/Occupation***........................................ ............................................................................................................................................. ............................................................................................................................................. ............................................................................................................................................. ............................................................................................................................................. .....................................................................................................**Household Income** Under £20,000 pa £40,000 - £49,999 pa£20,000 - £29,999 pa £50,000 +£30,000 - £39,999 pa Do you have savings above £25,000 Y / N |
| I confirm that the information I have given is true to the best of my knowledge and belief at the time of making this application.**Data Protection**The information you provide in this application form will be held and processed by Perennial in accordance with the Data Protection 1998 and will be used by Perennial to carry out grant processing, analysis, auditing and accounting. We will not disclose this information to any third party without first obtaining your consent. By completing and signing this form you are consenting to the information being used as stated. |
| **Completed by** (name in block capitals) .................................................................................................................Signature: ............................................................... Date: ..................................... |
| **12. PARENT’S DETAILS** |
| **Father**Name: .................................................Address: ................................................. .................................................Tel/Mob No.: .................................................Email: ................................................. | **Mother**Name: .................................................Address: ................................................. .................................................Tel/Mob No.: .................................................Email: ................................................. |
| Currently In Employment: Y / NHorticultural Background:............................................................................................................................................................................................................................................................................................**Household Income** (if both parents live at the same address please complete one section giving details of joint income)Under £20,000 pa£20,000 - £29,999 pa£30,000 - £39,999 pa£40,000 - £49,999 pa£50,000 +Do you have any savings ............ Y / N £........................... | Currently In Employment: Y / NHorticultural Background:............................................................................................................................................................................................................................................................................................**Household Income** (if both parents live at the same address please complete one section giving details of joint income)Under £20,000 pa£20,000 - £29,999 pa£30,000 - £39,999 pa£40,000 - £49,999 pa£50,000 +Do you have any savings ............ Y / N £........................... |
| I confirm that the information I have given is true to the best of my knowledge and belief at the time of making this application.**Data Protection**The information you provide in this application form will be held and processed by Perennial in accordance with the Data Protection 1998 and will be used by Perennial to carry out grant processing, analysis, auditing and accounting. We will not disclose this information to any third party without first obtaining your consent. By completing and signing this form you are consenting to the information being used as stated. |
| Completed by (name in block capitals) .................................................................................................................Signature: ............................................................... Date: ..................................... |