RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL ARTS BURSARY APPLICATION FORM FOR INDIVIDUALS 2019/20

OFFICE USE ONLY

DATE REC'D			DATE ENTERED					
ROUND			REF					
INFORMATION ABOUT YOU								
Applicant Name	Title	Forename		Surname				
The Council welcomes receiving correspondence in either Welsh or English and application packs for the Culture Bursary are available in both languages and will be dealt with equally. Please indicate your language preference. I prefer the Council to communicate with me in Welsh English								
Provide details of your current position - student, employed, unemployed Address	THE GOUNG!			Date of Birth				
				Post Code				
If you have not lived at this address for 4 years, please provide details of your previous address(es)								
If under 18, name and address of applicant's parent / legal guardian / representative (please indicate)	Name Address: as above / as follows							
				Post Code				
Tel / E-mail	Telephone n	umber	Mobile	E-mail				
APPLICATION PROPOSAL Answers should be limited to a maximum of 300 words. You are welcome to continue your answers on a separate sheet if more space is required. Please describe the purpose for which you are requesting funding.								

Please explain why you think you should be considered for a bursary.		
	and evidence of skills / talent. Please enclose any supporting	
documentation.		
development?	tcomes from this proposal and how it will further your	
development.		
Please explain how receipt of a grant would	d be beneficial to the wider community of Rhondda Cynon	
Taf	as se senement to the which community of Michael Cynon	
Please provide a full cost breakdown for th	ne request.	
How much of this cost have you had to		
meet (i.e. full, 50%, etc)		
Have you applied for help from any other	YES/NO	
source(s)?	1123/140	
If YES , please explain the source and		
result of your application		
If you are applying for help towards a		
trip/visit, please give details of dates		

REFEREE DETAILS

Attached to this application form is a reference request form. Please send this to your referee and ask them to complete and return it to you to attach to your application form. Please note, only applications with an accompanying referee report will be considered for funding.

Please provide contact details for your referee. This should either be an employer, governing body or a representative of your school/college/university/training establishment/mentor.

Referee contact information				
Name		Relationship to		
		you		
Address		Post Code		
Tel No		Email		

DECLARATION

- I certify that the information contained in this application is correct to the best of my knowledge.
- If the information in the application changes in any way I will inform Cardiff Council immediately.

Name		
Signed	 Date	

IMPORTANT

- 1. If you have any queries in completing this form, please contact ????????? who will be pleased to help.
- 2. Ensure that every question is answered as incomplete application forms may not be considered.
- 3. Ensure that you have paid the correct postage on your application as we cannot be responsible for paying any excess.

WHAT TO DO NEXT

PLEASE RETURN YOUR ARTS BURSARY APPLICATION FORM PLUS ALL SUPPORTING DOCUMENTS

- Either by email to ????????????
- Or by post to ???????????????????