THE SOCIETY FOR THE BENEFIT OF SONS AND DAUGHTERS OF THE CLERGY OF THE CHURCH OF SCOTLAND ('The Society')

(Constituted and Incorporated 1792: Reconstituted 1934)
Scottish Charity Number: SC008760

APPLICATION FORM FOR STUDENT GRANT

Objectives of the Society

To assist in the education and advancement of the children of Ministers of the Church of Scotland by making annual grants from their funds in cases where such assistance is required. Grants from the Society are available for both boys and girls.

Except in special circumstances no boy or girl shall be eligible for a grant until attaining the age of 12 years, or shall be continued as a beneficiary after attaining the age of 25 years.

To apply for a grant a parent or guardian ('The Applicant') should submit the accompanying application fully completed. In particular, the amount of the family income should be accurately stated and its sources detailed. Where application is made on behalf of more than one member of the family, a separate form should be completed for each, but particulars common to all members of the family need only be inserted in one of the application forms.

Grants are made for one year only. Should a renewal of the grant be desired an application form must be lodged each year.

A report may be requested on how the grant has been used and the achievements of the beneficiary.

Timetable:

- Applications for grants must be lodged by 31 May.
- You will be informed of the result of your application by mid-September.

This application form should be returned to:

Or by email to SM-Charity@azets.co.uk

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STUDENT GRANT APPLICATION FORM

SECTION 1 - To be completed by the Student

Applicant's full name:	
Date of Birth:	
Permanent address: Email address: Tel No: Mobile phone number:	
University/College to be attended during the year:	
Subject to be studied:	
Degree/Qualification to be gained:	
Year of course, e.g. 2 nd year of 4 year course:	
Is this in preparation for Ministry or mission work of Church of Scotland:	YES/NO
If studying in England, reason for choice of this University/College:	
Have funds been received for educational purposes from this Society previously?	YES/NO
If so please indicate relevant academic years and course studied.	
What would studying this course (being applied for) enable you to do that you could not otherwise do?	

SECTION 1 (Cont'd)	STUDENT GRANT APPLICATION FORM					
Income of Applicant (and/or Spouse/partner):	1.	Employment:	Self: Partner:	amount pa: amount pa:	£	
	2.			pa: pa:	£	
	3.	3. Income Support		pw:	£	
	4.	• •		pw:	£	
	5.	5. Any other State payments		pw:	£	
	6.	6. Other bursaries and grants (please state which)		ра:	£	
				ра:	£	
	7.	Approximate inco	ome from			
		Dividends Bank Inter Other	est	pa: pa: pa:	£ £	
	8.	Any other income	е	ра:	£	
Capital of Applicant (and/or spouse/partner):	Please indicate approximate value of:					
		Investments		ра:	£	
		Bank Deposits		pa:	£	
		Building Society	Deposits	ра:	£	
		Other		ра:	£	
Details of parent who is minister of the Church of Scotland:	Name of Mother/Father:					
	Address:					
	Charge or appointment:					

SECTION 1 (Cont'd	STUDENT GRANT APPL	CATION FORM
Other Relevant Information:		
DECLARATION:		
given in this applic		st of my knowledge and belief, the information ormation will be used to assist the Society in to its use for that purpose.
Signature of Applica	nt	Date
13.BANK DETAILS Your payment w details:	rill be transferred directly to your ba	ink account. Please provide your bank
Name:		
Name of Bank:		
Account Number:		

Sort Code:

^{*} It is your responsibility to provide correct bank details. The Trust takes no responsibility for funds not received due to an error in information provided.

STUDENT GRANT APPLICATION FORM

SECTION 2 - To be completed by Parent/Guardian where the student is under 25 years old

Family Income per	Ministers' gross stipend or salary:			£			
annum:	Ministers' gross income from investments or savings:			£			
	Spouses/partners gross or salary:	come	£				
	-		•				
	Spouses/partners income from investments: £						
Additional Income per		•		£			
annum:	Hospital or prison chaple						
	HM Forces:			£			
	Broadcasting fees:			£			
	Literary work:		£				
	Royalties:		£				
	Tutorial or teaching fees:			£			
	Any other service:			£			
Pension(s) per annum:	Retirement pension			£			
Other children being educated:	Name:	Age:	Educational Establish	hment:			
DECLARATION:							
I confirm that the information given is correct to the best of my knowledge and belief, the information given above is true. I understand the information will be used to assist the Society in proceeding with this application and I hereby give consent to its use for that purpose.							
Signature of Parent/Guardian							