

Please complete the form in black ink and write clearly

Please return the completed application form to:

- WRVS Benevolent Trust, PO Box 769, Chesterfield, S40 9NY
- Or by email: enquiry@wrvsbt.org.uk

If you have any queries, please telephone **07968 098275**, Leave a message and we will return your call.

WRVS Benevolent Trust Youth Bursary Criteria

Please read and confirm that you meet the criteria below before you submit your application:

The aim of the bursary programme is to support young WRVS volunteers (16-25 years) wishing to undertake an unpaid event or opportunity to assist in their personal/career development.

Pleas	Please tick to confirm that you meet the following criteria:			
	My opportunity is due to take place within the next 12 months.			
	My event/opportunity is unpaid and is contributing to my long term personal/career aspiration.			
	On completion of the event/opportunity I agree to submit a written report of 1,000 words, summarising my experience together with photographs if appropriate.			
	I will give permission to use my case study in WRVS Benevolent Trust publicity and on the WRVS Benevolent Trust website (For applicants under 18 parental consent will be required in writing).			
	I have volunteered regularly (at least 50 hours in the last calendar year) for WRVS/ Royal Voluntary service.			

Other Information

- Applicants must provide details of the event/opportunity manager and organising body and the bursary payments will be sent direct to them
- Youth Bursaries will be for a maximum of £2,000 per application

WRVS Benevolent Trust, PO Box 769, Chesterfield, S40 9NY, a registered charity in England and Wales no. 261931.
Telephone: 07894 060517, e-mail: enquiry@wrvsbt.org.uk, www.wrvsbt.org.uk



		Арр	licant	Informati	ion				
Full Name:	Title	F	ïrst			Last	Date:		
Address:									
To	wn					County		Postcode	
Telephone:				Email					
Date of Birth	W			intary Serv	vice Hi	story			
-	t currently volur can of your serv	_				_	-	_	
WRVS Volunt	eer number:	LM							
Date of Joinir	ng:			Date o	of Leavir	ng <u>:</u>			
Main Project:	:		Proje	ct manager	r / orgar	iser: _			
Project Mana	ger nhone numb	ner.							

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Any other projects past/	present Please List:		
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<u>Project</u>	Manager / Organiser	Telephone Number

I give my permission for you to contact RVS and for you to provide to them my name and contact details for the purposes of confirming my volunteering and for them to provide any membership/volunteering data held about me relevant to this application.

(Please tick the box if you agree)	
Signed	Date
Name	



Information about Your Application

Please give a brief description of what you are planning and your objectives including when it will take place, what you will be doing and how this will contribute to your future career and employability skills (max 200 words)

Ρle	ease give details of who is organising this event/opportunity:
1.	What is the event?
2.	When is it taking place?
3.	How long is it for?
4.	Who is the organising body?
	Name:
	Address:
	Telephone number:
	Website:
	Main contact:
	Email:



Please give details of how you intend to use this bursary:

1.	What is the money to be used for?
2.	What is the total cost?
3.	How much money are you asking for?
4.	How are you going to raise the balance?
5.	Are you applying for help from any other body?
6.	Additional information you would like to give to support your application



Terms and Conditions:

In order to validate your application you must read, understand and agree with the following terms and conditions, by ticking the box below.

- a. Bursaries will be awarded following evaluation by the Board of Trustees of the WRVS Benevolent Trust.
- b. The information I have provided within this application form is accurate. I understand that the information provided is subject to being checked.
- c. I will complete all required documentation when required to do so.

I	confirm I have read, understood and agree with the terms and conditions $\hfill\Box$
	Please tell us how you heard about the Benevolent Trust Youth Bursary Scheme
	Signad

Checklist

Please send us:

- 1. Completed, signed application form (if submitting electronically please sign this page and send it by post to the address on the first page).
- Reference from your RVS project manager.
- 3. Official confirmation of costings and dates from your event/opportunity manager.
- 4. If you are under 18 years of age Written parental consent to publish your case study in our publicity materials and on our website.
- 5. Any other documents you wish to use to support your application (please do not send originals).

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