

**THE CAMERON TRAVEL SCHOLARSHIP TRUST
GRANT APPLICATION FORM**

- *Please read the Application guidelines carefully before completing this form to ensure that the applicant is eligible and the activities for which a grant is being sought match the Trust's Categories of Interest.*
- *Please ensure all parts of this form are completed.*
- *Please ensure that the form is signed or marked as confirmed.*

Part A General information

A1. Name	<input type="text"/>			
A2. Address for correspondence (please include postcode)	<input type="text"/>			
A3. Telephone number(s)	<input type="text"/>			
A4. Facsimile number	<input type="text"/>			
A5. Email	<input type="text"/>			
A6. Date of birth	<input type="text"/>			
A7. Category of application (Please tick)	Agriculture <input type="checkbox"/> Dollar <input type="checkbox"/>			
A8. Has the applicant always lived in Scotland? If not, how long has the applicant lived in Scotland?	<table border="1"><tr><td>Yes _____</td><td rowspan="2"></td></tr><tr><td>No _____</td></tr></table>	Yes _____		No _____
Yes _____				
No _____				

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A9. What is the total cost of the project? Detail how this is made up.

£

A10. Amount requested from the Trust

£

A11. Has an application been made to this Trust before?

Yes No

A12. Please provide details of two independent referees who can be contacted by Trustees in the event that your application is shortlisted.

1.
Name _____
Address _____

Tel _____

Email _____

Reason why known to you _____

2.
Name _____
Address _____

Tel _____

Email _____

Reason why known to you _____

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Part B The application

B1. What will a grant from the Trust pay for and what evidence is there that it is needed?
What educational and wider social benefits do you expect to receive from your trip?

B2. Only a limited number of applicants may be successful each year. Why should the Trust approve your application?

B3. When is your proposed trip?

B4. How will you apply the knowledge acquired when you return?

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Part B (continued)

B5. If you are working during your trip, what salary and expenses do you expect to receive from your employer?

B6. If you are applying as an **agricultural student**, please supply details of the college or university you attend, together with details of your course in box B6. (a). If you are not attending a college or university, please provide details in box B6. (b) below as to how you undertake structured learning. In all cases, please detail your farming experience in box B6. (c)

B6. (a) College / University (Agricultural application)

B6. (b) Structured Learning (Agricultural application)

B6. (c) Farming Experience (Agricultural application)

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Part B (continued)

B7. If you are applying as a **Dollar student** please complete boxes B7.(a) and B7.(b).

B7.(a) Summary of Qualifications (Dollar application).

B7.(b) Major Extra-curricular involvement inside and outside the school context (Dollar application)

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Part C Financial information

C1. What other applications for funding have been made, to whom and what is the current status of these applications? Include details of any other fundraising being undertaken to assist in paying for the trip.

C2. What is your total annual income? Please use figures from the most recent complete fiscal year ended 5th April.

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Part D Declaration

I,, confirm and acknowledge:-

1. The information provided in this application is correct and accurate . If the Cameron Travel Scholarship Trust agrees to make a grant to me this will be used exclusively for the purposes described in this application.
2. If for any reason I am unable to undertake the travel for which a grant has been made I will be liable to reimburse the Trustees part or all of any grant paid, at their request.
3. If I undertake the travel detailed in the application, I do so at my own risk and I am responsible for complying with all laws, regulations, orders and requirements of other countries as well as for obtaining all entry and exit visas, health and other documents required by law or custom in the countries I am proposing to visit.
4. I will obtain from a reputable insurer, travel insurance cover of a type suitable for the proposed excursion to cover all the usual contingencies including medical and travel expenses and that the responsibility for ensuring that such cover exists and is adequate is solely mine.
5. I accept, in the event of any grant being paid by the Trustees to support my proposed travel abroad, that the Trustees are not in any way responsible to me or any third party for any adverse consequences arising directly or indirectly as a result of my travelling or being abroad whether foreseeable or not.
6. I agree that as a condition of being awarded a grant, I will provide the Trustees with a written report of my experiences within 2 months of completion and if requested to do so by the Trust, also agree to make a verbal presentation. Furthermore, I agree that the Trustees can retain ownership of my report, together with any associated photographs, and publish all or part of it or use it for promotional purposes to publicise the Trust.

Signed _____

Date _____

If submitting this application by email, please mark a cross in the box to signify acceptance of the above statement and terms.

Email applications to: dwalker@thomsoncooper.com

Postal applications to: David Walker
Thomson Cooper
3 Castle Court
Carnegie Campus
Dunfermline
KY11 8PB

Queries in respect of applications can either be directed via email or by telephone to David Walker 01383 628800.