## THE MARGARET MACEY EDUCATIONAL FUND

#### **APPLICATION FORM FOR GRANTS**

Please fill in the form below to apply for a grant.

Information provided via this form will be used by the trustees for the purposes of assessing eligibility and as the basis of selection for a grant from The Margaret Macey Educational Fund. All information will be treated in the strictest confidence and used for these purposes only. No information will be published which could identify you without your prior consent and no information will be given to a third party without your prior consent.

Notification of grants will be made in December for applications submitted by the end of October. When planning your submission, please allow sufficient time for the decision process.

Age (if under 18)

### **APPLICANT**

Name:

Address:			,			
Postcode:		Telephone:				
Home tower:		Email address:				
Ringing course for which the grant will be used						
Month and year of first ringing lesson		First lesson:				
and month and year of becoming a member of the KCACR		Joined KCACR:				
Aims and objectives for attending the course, including details of the particular group that will be applied for (eg: Plain Bob Doubles)						
Please indicate anticipated costs, including any travelling costs to be taken into account.						
being processed for information I have so	formation that I have the purposes of selec upplied in support of I understand that if	ction. I also unders my application is f	stand that if, sub ound to be inco	osequent to b rrect, the tru	eing offered stees reserve	a grant, the right to
Applicants signature						
Signed					Date	
Signature of parent/	guardian if applicant	is under 18.				
Signed					Date	

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## REFEREE

Relationship to applicant? (e.g.	
Instructor, Tower Captain, Ringing	
Master, etc)	
Opinion of the applicant's current	
level of competence in change ringing.	
Please include details on what they	
are currently learning.	
If applicable, please explain how	
previous tuition away from usual	
practice night lessons (for example on	
training courses or especially arranged	
quarter peals) has assisted in the	
applicant's progress	
How the proposed ringing course will	
benefit the applicant	
Cincad (noferna)	Data
Signed (referee)	Date

PLEASE SEND THE COMPLETED FORM TO:

The Margaret Macey Educational Fund, C/o 52 Stembridge Road, London SE20 7UF