

***Please read and sign the Data Protection on page 5, otherwise we can’t process your application***

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| **EDUCATION APPLICATION FORM**  *Please type when possible* |

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| **Professional name:** |  | | |
| **Legal name:** |  | | |
| **Contact Address:** |  | | |
|  | | | |
| **Email address:** | | | |
| **How did you hear about the ECT? How many years have you been in the profession?** | | | |
| Spotlight PIN no: |  | | |
| Daytime Tel No: |  | | |
| **Evening Tel No:** |  | | |
| **Date of Birth:** |  | | **Current Age:** |
| **Married**  **Separated**  **Single**  **Living with family** | | | |
| **If applicable, what is your partner/spouses’ occupation** | | | |
| **If you have children, please give their DOB** | | | |
| **Do you have other dependents?** | |  | |
| **When was your last professional engagement and how much did you earn?** | | | |

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| **What did you earn from your chosen profession in the last 12 months?** |
| **What were your NETEARNINGS after tax last year?** |
| **If applicable, please provide your partner’s NET EARNINGS after tax for the most recent accounting period:** |
| **NET MONTHLY income from your forms of employment:** |

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| **MONTHY INCOME & OUTGOINGS** | **YOU (**per month) | **PARTNER (**per month)  *This doesn’t apply to flat mates* |
| **Maintenance Costs:** |  |  |
| **Working and Child Tax Credit:** |  |  |
| **Child Benefit:** |  |  |
| **Universal Credit and Housing Benefit:** |  |  |
| **Job Seekers Allowance:** |  |  |
| **Disability Living Allowance, Attendance Allowance or any other Benefits:** |  |  |
| **Rent:** |  |  |
| **Mortgage payments:** |  |  |
| **Is it a repayment or interest only mortgage?** |  |  |
| **How much was the Mortgage taken out for and how many years are left on it?** |  |  |
| **How much is the property worth?**  **(check on zoopla or mouseprice):** |  |  |
| **Service Charge:** |  |  |
| **Council Tax:** |  |  |
| **Household & Content Insurance:** |  |  |
| **Building, Life, Medical and/or Pet Insurance:** |  |  |
| **Utilities & Water Rates:** |  |  |
| **Phone, Cable & Wifi:** |  |  |
| **Food:** |  |  |
| **Car tax, insurance & repairs:** |  |  |
| **Treatments:** |  |  |
| **Child Care & School Fees:** |  |  |
| **Spotlight, Equity & other membership fees:** |  |  |
| **Professional fees:** |  |  |
| **Other:** |  |  |

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|  | **YOU** | **YOUR PARTNER** |
| **BANK & OTHER ACCOUNTS**  **Current account**  **(credit/debit; please tick accordingly)** |  |  |
| **Total of other accounts:** |  |  |
| **Do you have an overdraft facility?** |  |  |
| **Outstanding credit card debt, loans and tax:** |  |  |
| **Do you have a Student Loan?** |  |  |

**ACADEMIC HISTORY:**

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| **GCSE, A & O Levels:** | **What year were these taken:** |
| **If you have any other qualifications through further education or university, please provide the name and grade name of the qualification e.g. Degree, BTEC, NVQ, the year and who funded it: yourself, your local LEA, privately:** | |

**COURSE APPLICATION**

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| **College Name & Address:** | |
|  | |
| **Course Name & Qualification:** | |
| **Date when the Course starts:** | **Have you been accepted onto this?** |
| **Course Duration:**  **Part-time**  **Full Time**  **Distance Learning**  **Other** | |
| **Do you see this as leading to a MA or Postgraduate Study or is it a means to an end?** | |
| **How much are the fees per year & how much are you applying to us for:** | |
| **Have you ever applied to us before for an education grant? If so, when and for what course?** | |

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| **How do you plan on paying the fees and have you approached any other charities?** |
| **Are eligible for a STUDENT LOAN**  **CAREER DEVELOPMENT LOAN**  **GOVERNMENT GRANT**  **If you are, how much have you been awarded?** |

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| **PERSONAL STATEMENT – not to exceed 500 words & which can be submitted on a separate sheet.** |

PRIVACY NOTICE

The Equity Charitable Trust takes your privacy seriously and will only use your personal data in order to process your application. If we are not able to help, we would wish to discuss in general terms your circumstances with other charities who may be better placed to help you. If you wish us to use your personal information, please ‘opt in’ by ticking the box, otherwise we cannot process your application. From time to time, we would like to alert you with news of events or workshops which may be of interest. If you wish to be contacted, please tick your preferred method of communication.

EMAIL □ POST □ OPT IN □

**DATA PROTECTION**

The sensitive details you have provided will be kept confidential. The Equity Charitable Trust will never sell your information or use it for any other purpose than in relation to your application.

I understand that the Equity Charitable Trust will hold my personal data and information, in either a hard copy or electronic form, for a maximum of six years at which point it will be destroyed.

The Equity Charitable Trust will only process your data for the purpose of this application and will not provide information to any third party for reasons others than those described above without your consent. If you wish to withdraw your consent, you may do so in writing to the Secretary at which point your data will be destroyed.

I therefore give my consent to the Equity Charitable Trust to process this information for the purposes of:

* My application being considered by the Education Committee
* The Equity Charitable Trust sending my application to other charities that may be able to assist me
* The Education Committee providing me with support

I CONFIRM:

**Signed**  ………………………………………. **Date**  ………………………………..

***Please note we’re unable to process your application without your signed consent.***

***Be sure to scan the signature page when returning the application by email.***

***NOTE WE ARE NOT ACCEPTING POST AT PRESENT***

***We cannot proceed without record of your signature.***

**Application Check List:**

□ Include your current CV

□ Any supporting documentation such as references or grades

□ A strong personal statement