

TITLE: Click or tap here to enter text.

FORENAME(S): Click or tap here to enter text.

SURNAME: Click or tap here to enter text

DATE OF BIRTH: Click or tap to enter a date.

PRIVATE ADDRESS: Click or tap here to enter text

CONTACT TEL: Click or tap here to enter text.

BUSINESS ADDRESS: Click or tap here to enter text.

TEL: Click or tap here to enter text.

MOBILE: Click or tap here to enter text.

EMAIL: Click or tap here to enter text.

**EDUCATION** **(Continue on separate sheet if necessary)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date from** | **Date to** | **Establishment** | **Qualifications** |
|  |  |  |  |

**PRESENT EMPLOYMENT (Continue on separate sheet if necessary)**

|  |  |  |
| --- | --- | --- |
| **Date of****Appointment** | **Establishment Name****& Address of Employer** | **Position** |
|  |  |  |

**PREVIOUS EXPERIENCE (Continue on separate sheet if necessary)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date from** | **Date to** | **Establishment** | **Experience Gained** |
|  |  |  |  |

**REFEREES**

Name and Address of the two referees whose letters supporting your application are attached.

|  |  |  |
| --- | --- | --- |
| 1 | Name Click or tap here to enter text.Address Click or tap here to enter text. | Status Click or tap here to enter text. |
| 2 | Name Click or tap here to enter text.Address Click or tap here to enter text. | Status Click or tap here to enter text. |

**LETTER OF APPLICATION**

This must be submitted independently and be attached to this form. The letter should indicate:

a. The reasons why you are applying for the award

b. An outline plan (including timescale), of the programme

c. The country(ies) and establishment(s) to be visited

d. The likely financial commitment

e. The potential benefit to students

**DECLARATION OF EMPLOYER**

I have read the conditions of the award and support the above application and, should it be successful, am willing to continue the applicant’s employment on full salary for the duration of the award.

**Signature .......................................................................... Position ..........................................**

Name (in Block Capitals) Click or tap here to enter text. Date Click or tap to enter a date.

Name of Establishment Click or tap here to enter text. Date Click or tap to enter a date.

Address of Establishment Click or tap here to enter text.

**DECLARATION OF APPLICANT**

I have read the conditions of the award and would, in the event of the application being successful, be prepared to fulfil the conditions and utilise the finance exclusively to develop my programme of study.

I further agree that my name, educational establishment and title of the project for which I have received the bursary may be disseminated for FCCT purposes.

**Signature ....................................................................................... Date ....................................**

 PLEASE RETURN APPLICATION AND SUPPORTING LETTER TO: -

ambassador@tfcct.co.uk

or

The Farmers Club Charitable Trust

c/o Keppel Gate

300 Burton Road

Overseal

South Derbyshire

DE12 6JN