CILIP SOUTH EAST MEMBER NETWORK: BURSARY APPLICATION FORM

Please complete this form with as much detail as possible, including event programmes, letters from the organisers confirming invitation and all associated costs and send to:

Claire Choong, Secretary CILIP South East MN Secretary.SE@cilip.org.uk

PERSONAL DETAILS						
Name						
Home Address						
Telephone numbers						
E-mail						
WORK AND/OR STUDY DETAILS						
Organisation						
Job title/Course title						
Address						
Telephone						
E-mail						
DETAILS OF TRAINING EVENT Please provide full details of the event and include any publicity.						
Name of event						
Organisation						
Date						
Venue & Location						
Your role at the event (tick which applies)						
Delegate Presente	r (Please give details below and include any letters of confirmation)					
Details of paper						
How would attendance benefit your personal development?						
(maximum 300 words)						
How would attendance benefit your organisation's development? (maximum 300 words)						
Why is your organisation unable to support the costs itself?						

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COST OF ATTENDANCE AT EVENT Please give a complete breakdown of costs below with details							
Total fundi	ng requested						
Conference	e fees						
Travel							
Accommod	dation						
Subsistence	e						
Other expe	nses						
REFERENCES							
Please attach a letter of endorsement from a referee; this should be your current employer if in employment or your academic tutor if studying.							
Reference	details						
Name							
Work/Home	Address						
Telephone r	numbers						
E-mail							
Relationship)						
DECLARATION							
I am a member of CILIP South East Member Network.							
I have not been awarded a bursary from other bodies for this event.							
Signature			Date		CILIP Membership No.		