

Max and Gladys Rothschild Scholarship Fund

1. PERSONAL DETAILS

Title:	First Name:				Marital Status
	Surname:				
DoB	Religion	Nationality		Children (state a	iges)
	_	-		·	
Permanent Addre	SS:				
Phone No:			Mobile No:		
e-mail address:					
Job and approxim	ate annual inc	ome where k	nown		
Parent/Guardian					
Partner					

2. DETAILS OF THE COURSE FOR WHICH A GRANT IS SOUGHT

Subjects in the Course:	Degree or Diploma
University:	Academic Year for which Grant is Sought:
Start Date:	Expected Date of Completion:

B. FULL DETAILS OF OTHER DUTCOMES RECEIVED TO D		OANS APPLIED FOR	AND ANY
. ESTIMATED EXPENDITURE	IN THE ACAD	DEMIC YEAR	
	Self:	Spouse/Partner: (if applicable)	TOTAL:
Tuition Fees			
Accommodation (including bills)			
Food			
Travel			
Books			
Other costs e.g. equipment			
(specify in Section 8)			
TOTAL			
	ı		l
. AVAILABLE/PROMISED FU ONSIDERATION	INDING FOR TH	HE ACADEMIC YEAR	UNDER
	Self:	Spouse/Partner: (if applicable)	TOTAL:
Savings at start of year			
Anticipated earnings during			
the year (specify in Section 8)			
Family contribution			
Other grapts obtained			
Other grants obtained			
Loans obtained (specify in			
Section 6)			
Other sources of support			
TOTAL			

6. LOANS

	Self:	Spouse/Partner: (if applicable)	TOTAL:
Current personal debts ¹			
Reduced interest funding ²			
TOTAL			

1.	e.g. Banks	Loans.	Overdrafts.	Credit	Cards.	. etc

7.	. AI	UT	OBIC	OGRAF	PHICAL	STATI	EMENT

^{2.} e.g. Student Loan Company, Government Loans, Family Loans, etc.

8. ANY OTHER RELEVANT INFORMATION
9. WHERE DID YOU HEAR ABOUT THE SCHOLARSHIP?
I declare that the above information is accurate. I undertake to report any material change in my financial or academic circumstances.
NAME: DATE:
This completed application form together with your CV, references and additional relevant information should be sent to: office@bnaibrithuk.org