Student Bursary Application Form 2022/23				
Full Name				
Date of Birt	h			
Address				
Email Addre	ess			
Contact Nu	mber			
How many years have you been a Cookham resident?				
Course of st	udy			
University/College/Employer				
Details:				
Length of course (years)				
Start Date				
Details of any proposed				
income you expect to receive:				
Assistance needed (e.g.				
books, tools):				
C: 1				
Signature:				
Data				
Date: All completed forms should be returned to the Cookham Welfare Trust at				
cookhamwelfaretrust@gmail.com				
All information contained within this form will be treated with the strictest confidence				
and in accordance with data protection legislation.				
FOR COOKHAM WELFARE TRUST USE ONLY				
Interview date offered				
Bursary offered				
Proof of residence seen				
Proof of course details seen				
Acceptance Form Received				
Notes:				

