

# Student Summer Study Bursaries Application Form



Application Forms can be completed using an online keyboard. Click on a box to insert (or remove) an X ☒. If you download, please complete the form legibly in black ink. Parent/Carers must sign the Application if the applicant is under 18 years of age. All sections of the form must be completed. Electronic signatures are acceptable, or the form may be printed off, completed and returned as a single scanned pdf of the complete document.

## STUDENT DETAILS

Please provide the information below

First name		Family Name		
Pronoun		Date of Birth	dd/mm/yy	
Address				
Country		Post Code		
Mobile		Email		

## PARENT/CARER DETAILS

First name		Family Name		
Relationship to Student				
Address if different from the student's above				
Country		Post Code		
Mobile		Email		

## PLEASE GIVE FULL DETAILS OF THE SUMMER SCHOOL OR INTENSIVE COURSE TO BE ATTENDED

Name of Summer School / Intensive Course				
Date/s	From: dd/mm/yy		To: dd/mm/yy	
Course Venue & Address including Country				
Name/s of Cecchetti Course or Tuition Provider/s				
Please indicate if the course is:-	Band 1: Non Residential <input type="checkbox"/> Band 2: Residential <input type="checkbox"/>			

**COST OF COURSE** (this may include accommodation/meal costs if residential, but not travel costs).

Please indicate if you are applying for the full course cost or for a specific amount of part funding.  
Please give costs in Sterling or other FCY

Full Cost - Amount		Part Costs - Amount	
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**TEACHER STATEMENT**

**This section must be completed and signed by the dance teacher of the named student.**

If a student attends a full time vocational dance training school the Principal of the School must sign to give permission for participation in a summer course, in addition to the student’s Cecchetti teacher.

I confirm that the named student is training at the Dance School or Vocational College below:			
Name of School/Vocational College			
Principal’s Name		Email	
Signature		Date	dd/mm/yy
Cecchetti Teacher’s Name (if different from Principal above)		Email	
Mobile			

**STUDENT QUALIFICATION HISTORY**

Please give details of the highest ballet examination the student has passed

Highest executant ballet qualification	Grade Level (eg G4) ____ Class Exam level (eg CE5)____ Intermediate Foundation <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced 1 <input type="checkbox"/> Advanced 2 <input type="checkbox"/>
Examination Board	ISTD Cecchetti <input type="checkbox"/> Other <input type="checkbox"/>
If other, please specify Exam Board:	RAD <input type="checkbox"/> BBO <input type="checkbox"/> IDTA <input type="checkbox"/> Other <input type="checkbox"/>

Please give details of the next Cecchetti examination to be taken

Executant ballet qualification	Grade Level (eg G4) ____ Class Exam level (eg CE5)____ Intermediate Foundation <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced 1 <input type="checkbox"/> Advanced 2 <input type="checkbox"/> Enrico Cecchetti Diploma <input type="checkbox"/>
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Please provide a short supporting statement outlining the student’s experience and how they would benefit from receiving a Bursary to attend the course.

Cecchetti Teacher’s Name (Please Print)		Date	dd/mm/yy	
Teacher’s Signature				

## APPLICANT PERSONAL STATEMENT

Please provide a Personal Statement, which should support the request for a Bursary and how the student will benefit from the chosen area of study. If the student is under 18 years of age the statement may be provided by their parent/carer.

Please include any other information you feel may be relevant - for example, why you need to apply - financial or other circumstances.

Name (Please Print)

Signature of Applicant  
(if under 18 years of age to be signed by the parent/carer)

Date

### Data Protection and Privacy Statement

The Trust holds the Applicants' information and contact details from the completed Application Form. The Trust will not disclose any information contained in this Application to any third party other than the Trust's Assessment Panel; or where the Applicant has given permission; or where the Trust is legally required to do so. The information will be treated in accordance with GDPR recipients for historical purposes. For further details on why the Cecchetti Society Trust collects your information, how it is used, and what rights you have please refer to the Cecchetti Society Trust Privacy Policy accessible online at [www.cecchettisocietytrust.org](http://www.cecchettisocietytrust.org). The Applicant (or their parent Carer if under the age of 18 years) agrees that if a Bursary is awarded, The Cecchetti Society Trust and the ISTD may wish to announce the names of the recipient in their publications, or publish photos on their websites and on social media.

Please complete **ALL PAGES OF THE FORM SAVED AS ONE DOCUMENT PER APPLICANT AND RETURN BY EMAIL TO:**

**Email: [admin@cecchettisocietytrust.org](mailto:admin@cecchettisocietytrust.org) by 13<sup>th</sup> May 2024.** Receipt of application will be acknowledged by email.

## FORM CST SSSBAF (2024)

[www.cecchettisocietytrust.org](http://www.cecchettisocietytrust.org)

Cecchetti Society Trust is incorporated in England as a Charitable Incorporated organisation (No CE028308) and is registered as a Charity in England & Wales (No. 1197857)

Registered Address: 28 Prykes Drive, Chelmsford, Essex CM1 1TP

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