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| Oisín McGrath Bursary Application 2017/18 | |
| **Section 1 ‐ Applicant Information** | |
| **Name of Group/Organisation: (If Applicable)** | |
| **First Name:** | **Surname:** |
| **Date of Birth:** | **Contact No:** |
| **Address:** | |
| **County:** | **Post Code:** |
| **Email Address:** | **Amount Requested: £** |
| **Section 2 ‐ Provide details of 2 Referees prepared to support your application. PLEASE NOTE: Referees must not be related to you.**  **Referee 1** | |
| **Name:** | |
| **Connection to Applicant:** | |
| **Address:** | |
| **Contact No:** | **Email address:** |
| **Referee 2** | |
| **Name:** | |
| **Connection to Athlete:** | |
| **Address:** | |
| **Contact No:** | **Email address:** |

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| **Section 3 – Bursary Objectives** |
| **Select objective(s) that indicate why you are applying for this bursary:**   * **Provision of equipment to support continuous development or to cultivate a new area in your chosen sport** * **Bursaries to assist individuals develop their sporting potential** * **Support sporting activities and events which will develop skills and potential in young people** |
| **Section 4 ‐ About Your Application** |
| **Tell us about yourself/your Group and what you hope to achieve if your application is successful.** |

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| **Outline how your application meets the objective(s) selected in Section 3.** |
| **Provide a breakdown of how the grant will be spent, including timescales.** |
| **Details of any other related funding you have already secured.** |

Section 5 ‐ Sign and Date to confirm that all information you have provided is correct. The form must also be countersigned by a parent or guardian if applicable.

To the best of my knowledge, the information provided on this form is correct.

I give permission for the Oisín McGrath Foundation to:

1. Record the information given in this form electronically, and to contact me by telephone, post or email in relation to the application.
2. If my application is successful, to give details of the grant on its website, social media, etc;

Before an award is made, I agree to advise the Oisín McGrath Foundation immediately if there are any significant changes in the information given in this form.

Signature: Date:

Parent/Guardian Signature: (If Applicable)

Date:

**Closing date for receipt of applications – 5pm Tuesday 31st October 2017.**

##### Return completed applications to:

The Oisín McGrath Foundation  
The Fermanagh Trust  
Fermanagh House  
Broadmeadow Place  
Enniskillen  
BT74 7HR

or email: [hazel@fermanaghtrust.org](mailto:hazel@fermanaghtrust.org)

To sign up to the Fermanagh Trust email newsletter tick here