Bursary Application Form

If you have problems with this form or any other part of the application process, please contact the chair of the bursary committee: bursary@autscape.org. It's fine to write your information on plain pieces of paper and scan them, if you can't do forms.

Bursary process/rationale

General information

We have to collect this information as we are spending contributions made by participants and the Autscape organisation. We have to justify this spending to external bodies as well. We will always aim to help as much as we can, where possible. This form is strictly confidential.

| Name |
|--|
| Address |
| Email |
| ☐ I have registered and I am waiting for my place to be confirmed |
| □ I have registered and my place at Autscape has been confirmed |
| The cost of your attendance |
| □ Standard fee |
| □ With en-suite |
| □ Shared en-suite |
| □ I am a carer or support worker helping someone else to attend |
| □ I will not participate individually in the full programme* |
| □ I am paying for the attendance of a child or dependent adult. |
| ☐ The child or dependant will not participate in the full programme* |
| Other people attending with me: |
| |

^{*} Participating in the full programme means attending lectures and activities based on your own interests. Not participating means attending limited parts of the programme, when the person is at Autscape primarily to support someone else to participate, or when the child/dependant will be with their parent/guardian most/all of the time

| Your history of attending Autscape |
|--|
| ☐ I have never been to an Autscape event |
| $\hfill \hfill$ I have not been to an Autscape event within the past two years (not in 2017 or 2018) |
| ☐ I have been to an Autscape event within the past two years |
| Your financial situation and other factors |
| Please explain the reasons why you require a bursary. |
| □ Low income due to |
| ☐ Low benefits |
| □ Low wages |
| □ Other |
| ☐ High living expenses due to |
| □ Supporting a family |
| ☐ High rent / mortgage |
| ☐ High level of debt |
| ☐ Travel costs (in your daily life) |
| ☐ Costs related to medical condition(s) |
| □ Other, specify: |
| ☐ High expenses related to attending Autscape |
| □ Need to attend with dependant(s) or supporter |
| ☐ Travel, including possible dependant(s) and supporter. |
| ☐ Paid care for dependant(s) at home while I am attending. |
| Briefly explain any other possible reasons for needing a bursary, or give further clarification to the points above (use separate sheet if necessary): |
| |

The amount

| The amount essential for me to attend Autscape, without compromising basic needs such as food, medical care or housing: |
|--|
| □ £50 |
| □ 100 |
| □ £150 |
| □ more than £ 150, specify amount: |
| If you are paying your own fee and that of dependant(s)/carer(s), state the total amount that would be necessary in order for you to attend: |
| Further information |
| The bursary committee may contact you to request further details. |
| You will receive a decision within 3 weeks of submitting your application. |
| Submitting the application |
| The filled application form can sent as an email attachment to: |
| - bursary@autscape.org |
| A paper version can be mailed to: |
| Bursary Applications |
| 29 Charles Street |
| Stockport |
| SK1-3JR |