

Homeopathy Action Trust
107 High Street
Totnes, Devon TQ9 5SN
Tel 01803 867747
info@homeopathyactiontrust.org
homeopathyactiontrust.org

REG. COMPANY NO. 2463858
REG. CHARITY NO. 328537

Guidance Notes for completion of Bursary Application Form

1. You **must** ensure that you fulfil both the following two criteria:
 - a. You have **satisfactorily completed a minimum of one year** of a homeopathic training course with a recognised course provider
 - b. You can demonstrate **financial need** for a Bursary
2. Please complete the Application Form as fully as possible, enclosing relevant supporting documentation. This will greatly assist us in considering your application. We will keep confidential all information received.
3. Your Application Form **must** be accompanied by a comprehensive reference from your College Principal, which must include details of your average attendance, average percentage coursework marks, percentage of acceptable coursework submitted and any examination results, since you started the course. A personal letter from you, giving reasons in support of your application, should also accompany your Form.
4. If you would like your Bursary application acknowledged, please enclose a stamped, self-addressed envelope.
5. A Panel of Trustees will assess your application and the Trust Administrator will write to you once a decision has been reached. As Trustees meet quarterly each year, this process may take up to 12 weeks.
6. Each standard Bursary is currently limited to £350 and is intended to assist students experiencing immediate hardship. Current resources do not permit any increase in individual Bursaries as we wish to share available funds as widely as possible.
7. All correspondence must be sent to the address on the Application Form.
8. Please ensure you enclose **THREE** collated copies of your Application Form, supporting letter, all supporting documentation and that you have allowed sufficient postage.
9. If you have any questions or require any further information, please contact the Trust Administrator:
Telephone: 01803 867747
Email: info@homeopathyactiontrust.org

Priority will be given to applicants who have not previously received a Bursary from Homeopathy Action Trust.



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Bursary Application

Bursary Number: *(HAT to complete)*

Please complete using BLOCK LETTERS

Name:.....

Address:.....

Address:.....

Address:.....

Email:.....

Telephone:.....

Course Provider:.....

Year studies began:.....

Type of course (Full or Part-time):.....



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Are you receiving or have applied for financial assistance from any other source?

YES/NO If YES, please give details:

.....
.....
.....

Current weekly income from all sources:.....

Declaration:

I wish to apply for a Bursary from the Homeopathy Action Trust and confirm that all information supplied is true to the best of my knowledge.

I enclose the following:

- Documentary evidence of financial need, such as receipt of any means tested benefit
- A comprehensive reference from the Principal of my course provider
- My supporting letter
- THREE collated copies of my Form, letter and all supporting documents

If my application is successful, I agree to submit for publication a short article on the Bursary has helped my studies.

Signed:.....

Date:.....



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