



Appendix A (Continued)

APPLICATION FORM

Educational Trust Fund – Supporting Individuals aged 16-25

DETAILS

Surname:	
First name:	
Address:	
Town:	
Post code:	
Telephone number:	
e-mail address:	



Data Protection

Midlothian Council will store and use the information about you (and anyone else) which you provide on this form and in any supporting correspondence or documents which you send or give to us ("your information") strictly in accordance with the Data Protection Act 1998.

Midlothian Council will:

1. use your information for [Educational Trust Fund] and, if otherwise, then only to the extent necessary for carrying out any of our statutory functions as a local authority (the "**Permitted Purpose**"); local community representatives will be on the panel and will see the details you provided in your application.
2. pass your information to those of our departments that need to know it for the Permitted Purpose. This means that although you send or give this form to one department of the Council, some or all of your information may be passed on to other departments of the Council; and
3. pass your information to other organisations outside [Specify other organisations if known] the Council, if and to the extent that we require to do so for the Permitted Purpose. These other organisations include anyone providing services to the Council in connection with the Permitted Purpose, and any other organisation with which the Council is required to work or cooperate in connection with the Permitted Purpose. Where appropriate these other organisations are named elsewhere on this form.

Unless required or permitted to do so by law, Midlothian Council will not use or disclose your information for any purpose or to any organisation other than those described here, without telling you first.

CATEGORIES

Please tick what you need support for :

Higher Education	
Further Education	
Training	
Other (please state	

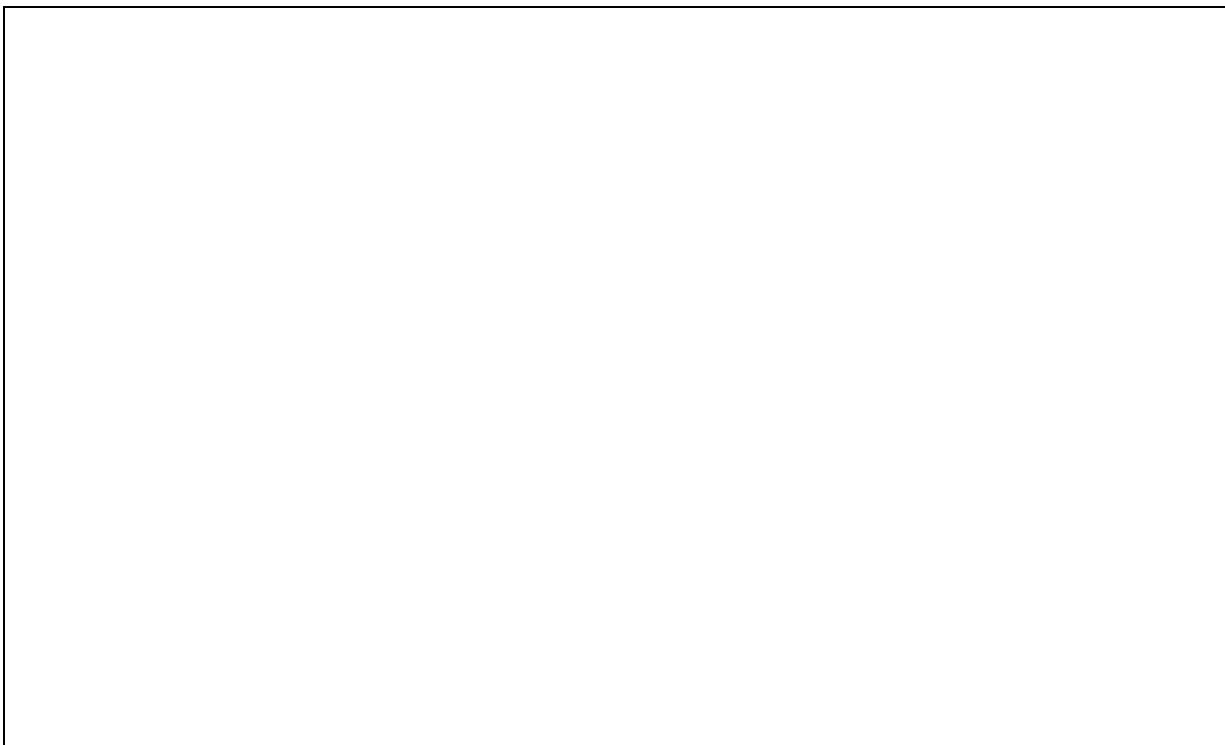
Activity agreements	
Volunteering	
Modern or trade apprenticeships	

I confirm I live in one of the eligible areas/villages/town: (please tick below)

Area	Please Tick
Borthwick	
Cranston	
Dalkeith	
Fala	
Gorebridge	
Loanhead	
Newbattle	
Newton	
Temple	
Newtongrange	

Please give the following details:

1) What will you use this money for and why do you need it?



Continued

3) How will receiving this money help your future?

DECLARATION

I certify that the information contained in this application is correct.

Name:
(Please print)

Signature:

Date:

NB. All individuals receiving funding will be expected to complete an evaluation form around 3 months after receipt of the grant. Recipients will be asked to provide copies of all receipts/invoices for expenditure related to the grant at this time

THE CLOSING DATE FOR THIS APPLICATIONS IS

XXXXX XXXXXXXXXXXXX

Please return completed applications to:

XXXXXXXXXX

XXXXXXX

XXXXXX

XXXXX

XXX XXX

COMMUNICATING CLEARLY

We are happy to translate on request and provide information and publications in other formats, including Braille, tape or large print.

如有需要我們樂意提供翻譯本，和其他版本的資訊與刊物，包括盲人點字、錄音帶或大字體。

Zapewnimy tłumaczenie na żądanie oraz dostarczymy informacje i publikacje w innych formatach, w tym Braillem, na kasecie magnetofonowej lub dużym drukiem.

ਅਸੀਂ ਸੰਗ ਕਰਨ ਤੇ ਖੁਸ਼ੀ ਨਾਲ ਅਨੁਵਾਦ ਅਤੇ ਜਾਣਕਾਰੀ ਤੇ ਹੋਰ ਰੂਪਾਂ ਵਿੱਚ ਪ੍ਰਕਾਸ਼ਨ ਪ੍ਰਦਾਨ ਕਰਾਂਗੇ, ਜਿਨ੍ਹਾਂ ਵਿੱਚ ਚਰੇਲ, ਟੇਪ ਜਾਂ ਵੱਡੀ ਛਪਾਈ ਸ਼ਾਮਲ ਹਨ।

Körler için kabartma yazılar, kaset ve büyük nüshalar da dahil olmak üzere, istenilen bilgileri sağlamak ve tercüme etmekten memnuniyet duyarız.

اگر آپ چاہیں تو ہم خوشی سے آپ کو ترجمہ فراہم کر سکتے ہیں اور معلومات اور دستاویزات دیگر شکلوں میں مثلاً بریل (ناپیدا افراد کے لیے) بھرے ہوئے حروف کی لکھائی میں، ٹیپ پر یا بڑے حروف کی لکھائی میں فراہم کر سکتے ہیں۔

Contact 0131 270 7500 or email: enquiries@midlothian.gov.uk