



APPLICATION FOR SPONSORSHIP ON APPRENTICESHIP PROGRAMMES

ALL APPLICATIONS SHOULD BE ADDRESSED AND RETURNED TO

Miss J.A. Edwards (Charity Secretary)
 Market Harborough and The Bowdens Charity
 10 Fairfield Road, Market Harborough, Leicestershire LE16 9QQ
 Telephone: 01858 419128
 Email: admin@mhbcharity.co.uk

This Grant Assistance is only available to those aged 19 to 30 years who live within the Market Harborough and The Bowdens areas and are fully employed. The apprenticeship programme to be undertaken must fall within the definition as laid down by the relevant Sector Skills Council, and be funded by the Skills Funding Agency

Please complete your personal details in BLOCK CAPITALS. The information on this form will be held on computer and in other necessary systems, and may be provided in accordance with the Charities registration under the Data Protection Act 1998

PERSONAL DETAILS:

Title (Mr/Mrs/Miss/Ms/Other):-	Male	Female
Last Name:	First Names:	
Date of Birth:		
Permanent Address: -		
Postcode:		
Telephone Number (Home):-	Telephone Number (Work):-	
Mobile:-	Email:	

EMPLOYMENT DETAILS:-	
Name of Employer:-	
Address:-	
Postcode:-	
Contact Person:-	
Telephone Number:-	
Nature of Business:-	
Apprenticeship applying for:-	
Name and address of College	
PREVIOUS EDUCATION HISTORY	
Last Secondary School Attended	
Qualifications and Grades achieved	

Name and Address of two Referees (one of which must be your current employer)

1st Referee	
Name:	
Position:	
Address:	
Telephone Number:	
Email:	
2nd Referee	
Name:	
Position:	
Address:	
Telephone Number:	
Email:	

Please describe briefly why you want to undertake this apprenticeship and how it will benefit you:-

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Cost of Course:	£	Per annum
Length of Course:		

I am living within Market Harborough or The Bowden Villages. I am between the ages of 19 and 30 years of age and am in full time employment. I have the full support of my employer to undertake this programme of study. My employer will provide the necessary time and training to enable me to complete this programme.

Signed: _____ APPLICANT	Dated:
Signed: _____ EMPLOYER	Dated: