**Educational and Scientific Trust**

**Application for a Grant**

### Objectives

The primary object of the Trust is the advancement of forestry education. There are four Trustees including the current President and Vice President of the Institute and a Trust Fund is maintained through donations and investment income from the capital.

### Target Group

The Trust funds **students and others early in their forestry career**to undertake relevant professional development. Applicants should be members of the Institute of Chartered Foresters.

There are three separate bursaries:

Please note that grants are not awarded to fund undergraduate or postgraduate studies.

**EST Travel Bursary**

The EST’s flagship award of £550 is awarded annually. High quality proposals will be sought which demonstrate that the proposed travel will make a substantial contribution to the applicant’s professional development. One award will be made to the candidate who in the Trustee’s opinion makes the best case.

**EST Events Bursary**

Several awards of £110 will be made available for attending the ICF National Conference or Study Tour.

**EST Professional Development Awards**

A discretionary award that Trustees consider will make a valuable contribution to an applicant's professional development. Grants are unlikely to exceed £440. These awards are not designed for technical training such as chainsaw licences.

Funds are limited and may be sufficient to cover only part of the costs. They are principally provided for individuals with limited resources and are not available for large projects.

Applications for the Professional Development Awards are considered by the Trustees on a rolling basis. Projects that have commenced before application will not be considered.

Applicants must undertake to provide a written report (which may include photographs) on their project within three months of its conclusion, as a condition of receiving a grant.

**This application must be accompanied by a supporting statement by someone with a personal knowledge of the applicant and the competence necessary to appraise the value of the project to the applicant’s professional development.**

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| --- | --- |
| **Personal Details** | |
| Full Name:  Title:  Address:  Postcode: | Email Address:  Home Phone:  Mobile Phone:  Work Phone: |
| Date of Birth: | Male  Female |
| ICF Membership number: | |

Which grant are you applying for? (Please tick appropriate box)

Travel Bursary Events Bursary Professional Development

|  |  |
| --- | --- |
| **Funding** | |
| Total cost of project: | Amount of grant requested: |

|  |  |  |
| --- | --- | --- |
| **Grants from other bodies**  List full details of funding requests from other bodies and the results obtained. | | |
| Organisation | Amount | Result |
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| **Project**  Give full details of the project for which you are seeking funding. |
| Describe how this project will help your professional development and how your career will develop. |

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| **Employment**  Please provide details of your employment or if a full-time student, the college and department. |
| Employer or College name and address:  Job Title or Course: |

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| **Other Information**  Give details of any other information relevant to your application. |

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| **Applicant’s Declaration**  I certify that the information contained within this form is true and accurate to the best of my knowledge and belief. I understand that any information that is knowingly withheld, suppressed, deliberately misleading or false, may make me liable to repay any grant awarded.  Signed:  Name printed:    Date: |

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| --- |
| In compliance with the Data Protection Act 1998, ICF will treat all information contained within this form as confidential. No information will be divulged to other parties and will be used only for those purposes expressed. |

Please complete the form in digital format and then print, sign and send via email to [icf@charteredforesters.org](mailto:icf@charteredforesters.org).

Please note that the decision of the Trustees is final.

**Important: Remember to include a Supporting Statement.**

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| --- | --- |
| **Supporting Statement**  This section must be completed and signed by someone with a personal knowledge of the applicant and the competence necessary to appraise the value of the project to the applicant’s professional development and career progression. | |
| Full Name:  Title:  Relationship to applicant: | Email Address:  Contact Phone no: |
|  | |
| *I verify that the details given in this application are to the best of my knowledge correct in all particulars. I understand that the Educational & Scientific Trust may seek further information from me in support of this application.*  Signed: Date: | |