Teacher Study Bursaries Application Form



Application Forms can be completed using an online keyboard. Click on a box to insert (or remove) an $X \boxtimes$. If you download, please complete the form legibly, using capital letters, black ink and marking an X in the appropriate boxes.

PERSONAL AND EMPLOYMENT DETAILS

Please provide the information below

First name		Family Name			
Pronoun		Date of Birth			
Address					
Country		Post Code			
Mobile		Email			
Current status	Student Freelance teacher School owner Employed				
	ex Professional dancer 2 Not active 2				
Do you hold ISTD Cecchet	tti Registered Teacher status	?	Yes 2 No 2		
ISTD membership number					
ISTD type of membership					
If you are an ex Professional dancer:					
What was your last comp	any of employment				
When did you leave or intend to leave the company		dd,	/mm/yy		

QUALIFICATION HISTORY

ISTD:

Please provide details of your training with ISTD:

What is your highest regulated Teaching qualification?	DDE L4 2 DDP L6 2		
In what genre?	Cecchetti 2 Other 2		
If other, please specify:			
What is your highest unregulated Teaching	Associate 2 Associate Diploma 2 Licentiate 2 Fellowship		
qualification?	?		
In what genre?	Cecchetti 2 Other 2		
If other, please specify:			
What is your highest Executant exam?	Intermediate 2 Advanced 1 2 Advanced 2 2		
	Enrico Cecchetti Diploma 🛽		
In what genre?	Cecchetti 2 Other 2		
If other, please specify:			

Other recognised Awarding Organisations:

Please provide details of your training with other recognised ¹ Awarding Organisations:

What is your highest Teaching qualification?	
In what genre?	
Awarding organisation	RAD 2 BBO 2 IDTA 2 Other 2
If other, please specify:	

What is your highest Executant exam?	Intermediate 2 Advanced 1 Advanced 2 Solo Seal (RAD only) 2		
In what genre?			
Awarding organisation	RAD 2 BBO 2 IDTA 2 Other 2		
If other, please specify:			

Other relevant education:

Please provide details of any other education or qualifications you consider relevant to this application e.g.,
, , , , , , , , , , , , , , , , , , , ,
Degree study/qualifications; Pilates, Community Dance study/qualifications.

PURPOSE OF APPLICATION

Please tell us how you intend to use the Bursary and the Band of funding you have applied for:

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Name of provider					
What are you applying for?					

What type of activity is this?	Course fee 2 Class fee 2 Summer school fee 2 Private tuition fee 2 Examination fee 2 Travel costs 2 Research 2 Other 2
If Other, please specify	

When is the activity being held?	l dd/mm/vv	
which is the activity being held:	au, iiiii, yy	

What Band are you applying for?		Band 1 2 Band 2 2 Band 3 2 Band 4 2 Band 5 2			
If Band 1-3, what is the actual cost of?		Activity:			Travel:
If Band 4, what is the actual cost of		CPD:			Travel:
If Band 5, what is the actual cost of		Study:			Travel:
When do you have to pay?	dd/mm/yy				
Have you applied for funding elsewhere?			No	2 Yes - ISTD 2 DPF 2	CST ? Other ?
If other, please specify:					

¹ Recognised by CDMT Council for Dance Drama and Musical Theatre

PERSONAL STATEMENT

This Application should be accompanied by a detailed Personal Statement which should support your request for a Bursary, and how you will benefit for your chosen area of study.

Please include any other information you feel may be relevant - for example, why you need to apply - financial or other circumstances.

LETTER OF SUPPORT

This Application and Personal Statement may be accompanied by a Letter of Support from an ISTD Cecchetti teacher/examiner/mentor who knows the Applicant personally.

AGREEMENT

By signing and submitting this Application form, your Personal Statement (and a Letter of Support), you agree to the terms and conditions of award, the Trust's Data Protection and Privacy Statement and to being contacted using the contact details given. The Applicant further agrees that if a bursary is awarded, the Trust and the Provider may wish to announce the names of the recipient in their publications or publish photos on their websites and on social media.

Name Signature

Date

Please sign and date the Form, add your detailed Personal Statement and a Letter of Support (if you have one), save as a one-document pdf and email to

admin@cecchettisocietytrust.org by 1st March 2024.

Data Protection and Privacy Statement

The Trust holds Applicants' information and contact details from the completed Application Form. The Trust will not disclose any information contained in this Application to any third party other than the Trust's Assessment Panel; or where the Applicant has given permission; or where the Trust is legally required to do so. The information will be treated in accordance with GDPR recipients for historical purposes. For further details on why the Cecchetti Society Trust collects your information, how it is used, and what rights you have please refer to the Cecchetti Society Trust Privacy Policy accessible online at www.cecchettisocietytrust.org.

FORM CST TSB2AF(2024)

