BLAIRGOWRIE HIGH SCHOOL PARENT COUNCIL

APPLICATION FOR PERSONAL DEVELOPMENT AWARD

Name		Year	
Reason for request			
Date of Activity			
Amount applied for	Total Estimated Cost .		
1 Are you a member of a group or organisation linked to your named activity?			
2 Previous experience relevant to this applic	cation:		

3 How do you feel you would benefit from taking part in this activity?

4 Have you applied to any other funding organisations?

Г

5 There are only 6 awards made each year – why should we consider your application? (approx. 50 words)

٦

Signed	Date	

Please return this form to the School Office. Applications are considered monthly.