NEWNHAM COLLEGE, CAMBRIDGE

GRADUATE AWARDS AND RESEARCH SUPPORT COMMITTEE

**APPLICATION FOR STONEY TRAVELLING STUDENTSHIP**

Part I should be completed by the applicant and the form passed to her academic referee for completion for Part II and return to Newnham not later than 1 May 2019

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PART I

1 NAME (please put full initials)

ADDRESS FOR CORRESPONDENCE

CLINICAL SCHOOL

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2 FINANCIAL CIRCUMSTANCES

If you receive a Local Education Authority or any other award, please give details below:

a) SOURCE (i.e. name of LEA or award giving body)

b) AMOUNT (e.g. approved fees plus £x. p.a.)

c) PARENTAL CONTRIBUTION TO MAINTENANCE

d) OTHER INCOME (excluding special grants related to this application)

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3 PROPOSED TRAVEL FOR WHICH APPLICATION IS BEING MADE

a) Dates of travel (inc. year) from: to:

b) Location where study will take place (hospital/clinic, town, country)

c) Please state what experience you expect to gain from your study, its relevance to your career in Medicine and the country you will be visiting (continue overleaf if necessary)

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4 ESTIMATED COST

a) Travel

b) Board and Lodging

c) Other expenses (give details)

Total:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5 HOW ARE YOU FINANCING THE ELECTIVE? e.g. savings, help from parents, bank loans

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6 OTHER BODIES TO WHICH YOU HAVE APPLIED FOR A GRANT. State all sources applied to, whether successful or not, and amount of funding obtained in each case.

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Signature: Date:

PART II To be completed by the academic referee (who should where appropriate be an officer of the Clinical Medical School).

COMMENTS ON APPLICATION, AND ANY OTHER RELEVANT INFORMATION

Signed: Date:

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After completion of Part II the form should be returned to the Tutorial Office (tutorial.office@newn.cam.ac.uk), Newnham College, not later than 1st May 2019.

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PART III To be completed by the Director of Studies in Clinical Medicine, Newnham College.

COMMENTS ON APPLICATION

Signed: Date:

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