Provincial Priories of East, South & West Alster







Harold McMaster Taggart Fund Application for Postgraduate Bursary

Closing Date For Applications Completed applications should be returned, in confidence, to

JIM KILPATRICK 7 EDGEWATER COVE DONAGHADEE BT21 0EG (H) 028 9188 8987 (M) 07715 167837

5.22 525

or by email to taggartfund@gmail.com

PLEASE COMPLETE ALL DETAILS IN BLOCK CAPITALS

1. PERSONAL DETAILS

Title:	Foren	Forenames:			Surname:	
Marital Status: Maiden Name: (If approp		en Name: (If appropriate	e)		Date of Birth:	
Home Telephone Number: Mobile Telephone		Mobile Telephone Nur	Number: Email Address:			
Home Add	ress:			Ad	dress fo	or Correspondence (If different):
Post Code:				Post Code:		

2. SPONSOR DETAILS

Title: Forename:		Surname:	Relationship to Applicant:
Address:			
Post Code:		Telephone:	
Lodge Name & No.:			

Please note that all applications must be sponsored by a subscribing member of the Masonic Order. Preference will be shown, should the quantity of applications received in any one year dictate it, to those applications sponsored by members of the Order of the Temple.

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3. ACADEMIC ACHIEVEMENT

A. SECONDARY EDUCATION - A LEVEL (OR EQUIVALENT)

Subject Studied	Grade	Subject Studied	Grade

B. UNIVERSITY EDUCATION

Name of University:	
Department:	
Course of Study:	
Degree & Class Awarded:	

Name of University/College:	
Department in which studies will be unde	rtaken:
Title of Further Qualification (Degree/Diplon	na):
Duration of course of study:	Course start date:
Please give brief details of your proposed career path this qualification will assist in	course of study, why it is of interest, and the intendent achieving:

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5. FINANCIAL IMPLICATIONS OF PROPOSED COURSE OF STUDY

A. COURSE FEES AND EXPENDITURE

Please give brief det	alls of all proje	cted expenditure during the proposed course of study:
Course Fees :	£	Details:
Course materials :	£	Details:
Accommodation :	£	Details:
Subsistence :	£	Details:
Travel:	£	Details:
	=======	
Total:	£	

	B. INCOME		
	Please give details of to support you during		rojected sources of income or funding which you will use tudy:
	Personal Savings:	£	Details:
	Family Assistance :	£	Details:
	Educational Grants or Bursaries :	£	Details:
	Other Masonic Assistance (Fund and value):	£	Details:
		=======	
	Total:	£	
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6. EMPLOYMENT

Please list any recent employment, either permanent or casual, beginning with the most recent.

	POST	DATES OF	DATES OF TENURE		
EMPLOYER		FROM Month & Year	TO Month & Year	(PER ANNUM)	

7. LEISURE ACTIVITIES

Please describe how area (e.g. interests,			evements you may have had in this
8. FINANCIAL INFO	RMATIC	DN	
	tion be	successful, please confirm the detai	Is we should use when preparing
your cheque -			
Account Name :			
Address where we	should so	end the cheque :	
Address where we	modia 3	and the thought !	
			Postcode :
		rm or high resolution digital head and before the closing date of 31 st August.	shoulders or graduation photograph of
	giridii.com	porore the dosing date of 32 August.	
ONSENT:	with the	Fund's obligations under the Data Prote	ection Act 1998, to selected details of my
plication, including my	name and	d image, being used at the discretion of	the Fund, within the annual report of the
		printed media directly associated with	arities Act (NI) 2008. This consent also the Masonic Order and this Fund.
Signature of App			Date of Application
		For Fund Use Only	
Approved []		
Declined [. 1	Value of Award £	Date

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