**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Name |       |
| Date of Birth |       | Male [ ]  | Female [ ]  |
| Email Address |       |
| Telephone No. |       |
| Mailing Address.House Name / No.StreetTownCountyPost Code |                           |

**TRAINING COURSE OUTLINE**

|  |  |
| --- | --- |
| Organisation |       |
| Name of Course |       |
| Country |       |
| Proposed Dates | From:       | To:       |
| Outline of activity / qualification if applicable. |       |

**PERSONAL BUDGET**

|  |  |  |  |
| --- | --- | --- | --- |
| **Costs** | **£** | **Income** | **£** |
| Quoted cost of training course |       | Personal contribution |       |
| Travel to training course |       | Other grants\*(please list) |  |  |
| Insurance\* |       |       |       |
| Personal equipment\* |       |       |       |
| Other costs(please list) |  |       |       |
| Other sources(please list) |  |
|       |       |  |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **Total** |       | **Total** |       |

\*if applicable

|  |
| --- |
| Outline any other fundraising efforts you have made? |
|  |

|  |
| --- |
| Amount requested from the Get Exploring Trust? |
| **£** |

**OTHER QUESTIONS**

|  |
| --- |
| Why do you want to participate in this course? |
|  |

|  |
| --- |
| What do you expect to gain from this course? |
|  |

|  |
| --- |
| What will you use the grant for? (e.g. cover course costs, buy personal equipment etc.) |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Would you be happy to provide GET with an expedition report and photos after returning? | **Yes** | **[ ]**  | **No** | **[ ]**  |
| Would you be happy to give a presentation on your expedition to a school group if the opportunity arose? | **Yes** | **[ ]**  | **No** | **[ ]**  |

**DECLARATION**

I declare that, to the best of my knowledge, the information submitted in this application is correct and I have not withheld or concealed anything which may influence assessment of this Application. I authorise The Get Exploring Trust to make such enquiries as they may consider necessary to verify the information I have given in this Application. Should any significant developments arise after this application is made I will keep the Get Exploring Trust informed of the changes.

Should this training course be cancelled or postponed subsequent to receiving support from the Get Exploring Trust, I will return the grant awarded.

Signature of Applicant …………………………………………………... Date ………………………………