



FRANCES PATERSON SCHOLARSHIP

APPLICATION FORM

The Candidate

Full Name:	
Contact Details:	
Academic and Professional Qualifications: <ul style="list-style-type: none">• Institutions• Subjects• Dates	
Other relevant professional experience: (Eg research or publications undertaken or relevant professional experience)	

University details

Name of University: (including faculty/department where registration is intended)	
Name of Supervisor or intended supervisor	
Topic for research (up to one A4 page) specifying intended outcomes	
Duration of Programme giving start and end date	
Fee for the first year	

Signed:	
Name:	
Position:	

This form should be completed and returned to:

Prof Anthony Lavers
c/o SCL Administration
234 Ashby Road
Hinckley
Leicestershire
LE10 1SW