The Marlowe Award Scheme

| Personal details of participant | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------|----------|-----|----|--|
| Name | | | | | |
| Date of birth | | | | | |
| Address | | | | | |
| | | Postcode | | | |
| Home telephone | Mobile | | | | |
| Email | | | | | |
| Is the above person at school/college/university or a of education or training? If yes, please give the name of the organisation: | any other type | | Yes | No | |
| Contact details of parent/guardian/carer (if applicable) | | | | | |
| The adult completing this section will be the primary contact with The Marlowe if the applicant is under 18 years. | | | | | |
| Name | | | | | |
| Relationship to the applicant | | | | | |
| Address | | | | | |
| | | Postcode | | | |
| Home telephone | Mobile | | | | |
| Email | | | | | |
| Please tick if any of these apply to you or the recipie | ent: | | | | |

Currently in care or a care giver Special educational needs English is a second language Refugee or asylum seeker

In receipt of:

Free School Meals Employment and support allowance

Working tax credits Incapacity benefits

Income support Disability allowance for children Jobseekers allowance Personal independence payment

Does the applicant you have a Young Person's Travel card?

Yes

No

| Tell us about yourself | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------|--|--|--|
| What would it mean to you to be part of a creative company at The Marlowe? (max 400 words) | | | | | |
| | | | | | |
| Declaration | | | | | |
| I am authorised to submit this application and confirm that the information enclosed is correct. By signing this form I agree to reading and abiding by the terms and conditions included in the grant guidelines. I give permission to The Marlowe and The Marlowe to record the information in this form electronically. | | | | | |
| Signature of applicant (if over 18 years) | | | | | |
| Signature of parent/guardian/carer (if applicant under 18 years) | | | | | |
| Date | | | | | |
| Supporting reference | | | | | |
| Please provide details of one referee who would be happy to be contacted regarding your application. A referee may include any of the following, but not limited to: parent, guardian, foster carer, social worker, youth worker, teacher, drama tutor or dance teacher. | | | | | |
| Referee's contact details | | | | | |
| Name | | | | | |
| Address | | | | | |
| | | Postcode | | | |
| Daytime telephone | Mobile | | | | |
| Email | | | | | |
| What next? | | | | | |
| Email your application to creativecompanies@marlowetheatre.com. | | | | | |
| Alternatively post it to us at: | | | | | |
| The Marlowe Award Scheme The Marlowe The Friars Canterbury Kent CT1 2AS | | | | | |
| Or hand in your signed copy at The Marlowe's Stage Door. | | | | | |

Remember to give us your email address so that we can acknowledge receipt of your application.

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