Application for Cardiff University   
**Professor URQ Henriques Scholarship Fund**

Application for full-time Masters, MPhil or PhD bursary

**Name**

|  |  |  |
| --- | --- | --- |
| Title | First name(s) | Last name |
|  |  |  |

##### University applicant number

|  |
| --- |
|  |

##### Intended programme of study

|  |  |
| --- | --- |
| Masters/PhD | Programme title |
|  |  |

##### Contact details

##### CORRESPONDENCE ADDRESS HOME ADDRESS (if different)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Valid to: |  | |  | From: |  | | To: |  |
| Address |  | |  | Address |  | | | | |
| Address |  | |  | Address |  | | | | |
| Postcode |  | |  | Postcode |  | | | | |
| Country |  | | Country |  | | | | |
| Telephone: | |  |  | Telephone: | |  | | | |
| Email Address: | |  | Email Address: | |  | | | |

**Career in higher education to date**

**Undergraduate degree Postgraduate Master’s degree**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of university and/or college, and country (if not UK) |  | | | |  | | | |
| Mode of attendance | Full-time | | Part-time | | Full-time | | Part-time | |
| Month and year in which your programme started and finished (or will finish) | Start date  month year | | End date  month year | | Start date  month year | | End date  month year | |
|  |  |  |  |  |  |  |  |
| Qualification and title of award  (e.g. BA Archaeology) |  | | | |  | | | |
| Degree classification (please indicate if awarded or projected) |  | | | |  | | | |

Applicant's supporting statement

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| *This supporting statement should be no longer than 500 words.* |

**Details of your Research Proposal (Not more than 1000 words)**

***Masters applicants***should outline the area of study and their plans for the dissertation.

***PhD / MPhil applicants***should clearly provide 1) the title for their thesis 2) an explanation of the scope 3) significance of their research.

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Applicant's declaration

I confirm that the information I have provided on this form is complete and accurate to the best of my knowledge at this date.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |

**Deadline for the receipt of this application is 1 June**