

NATIONAL PONY SOCIETY

Education / Training Bursaries Kindly Supported by Levant Stud & Sinton Stud

The aim of the bursary is to offer financial assistance to access specialist training for up to the sum of £250.00 kindly given by the Levant Stud, and a second bursary of £125 to the runner up kindly given by the Sinton Stud.

- Applicants must be aged between 10 and 18 years old on 1st January 2021 and be a current NPS member in their own right or their parent/guardian must be a member.
- Funding may be requested for:
 - A) A series of lessons with a new instructor, working at a higher level;
 - B) Cross-discipline tuition (e.g. a WHP rider who wishes to take lessons with an approved eventing instructor);
 - C) Attendance on a short, intensive course with an approved instructor.
- The instructor will be asked to raise an invoice for their work and funds will be paid direct to the instructor as part or full payment for their time.
- Candidates will be evaluated in December 2020, presentation to be made at the 2021 AGM with funding tranches to be paid throughout 2021.
- The successful candidate will be presented with their bursary at the 2021 AGM and will be asked to write a short report for the 2022 NPS Review, explaining what they did with the funds and how it has benefitted them.

If you are interested, please complete the attached application form and return it to the NPS Office for the attention of Heather Abrahall by Friday, 14th December 2020.

NPS Bursary Scheme Application Form

| Name: | D.O.B. | / | |
|---|-------------------|--------------|----|
| Address: | | | |
| Telephone: Email: | | | |
| I am a current NPS Member My parent/g | | | |
| Membership No:Year Joined: | | NPS Area: | |
| Name of current instructor(s)/trainer(s): | | | |
| Name of proposed instructor(s)/trainer(s): | | | |
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| 1. Please outline your ridden or in hand experi | ience so tar (max | x 250 words) | |
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| 2. a) Please outline your involvement with the | | <u> </u> | g. |
| assisting at area shows, member of area or | national teams) | | |
| | Diagon High | 1 | |
| | Please tick if | | |
| | appropriate | | |
| Attend local NPS Area Show | арргорписс | - | |
| Assist at local NPS Area shows or events | | 1 | |
| Attend NPS Spring Festival | | 1 | |
| Attend NPS Summer Championship Show | | 1 | |
| Assist at the Spring or Summer | | 1 | |
| Championships | | | |

| 3. Please explain what you would like to use the NPS bursary for and how this would develop your current training and experience (max 250 words) | | | | | | | | |
|--|--|---|--------------|---|---------------------|--|--|--|
| Type of training (e.g. Dressage lesson) | | jectives and aims once training is completed g. Qualify for National Dressage Champs) | | How will this be achieved (e.g. 6 lesson with person X) | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 4. Please indicate the anticipated costs for your proposed training plan. If the NPS bursary is insufficient to cover the costs, please indicate how the shortfall will be met | | | | | | | | |
| Training | | Cost of Training | Mileage Cost | Total Cost | Short Fall (if any) | | | |
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b) Please provide further details of your involvement with the NPS (max 250 words):

Reference 1

Referee cannot be a relative of the applicant or a member of the Council but must be a current member of the NPS.

| Referee 1 | |
|--|--|
| Name: | NPS Membership No: |
| Telephone: | Email: |
| Reference: | |
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| Signed: | Date: |
| | |
| Referee 2 – Optional. Reference and be a non-member of the can be a non-mem | ree cannot be a relative of the applicant or a member of the Council buse Society. |
| Name: | |
| Telephone: | Email: |
| Are you a current member | of The National Pony Society? Yes No No |
| Reference: | |
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| | |
| Signed: | Date: |
| J.D Cd | |

Applicant declaration (if aged 18 only)

| I declare that the information given is accurate society's terms and conditions. | to the best of my knowledge and agree to the | | | |
|---|--|--|--|--|
| Print Name: | | | | |
| Signed: | Date: | | | |
| Parent/Guardian of the Applicant declaration | | | | |
| I declare that the information given about knowledge and agree to the society's terms and | | | | |
| Print Name: | | | | |
| Signed: | Date: | | | |
| Please return this form to: | | | | |
| Heather Abrahall | | | | |
| National Pony Society | | | | |
| Arthur Rank Centre | | | | |
| Stoneleigh Park Warwickshire | | | | |
| CV8 2LG | | | | |

Should you require any further information please contact the office on 01420 88333 or email admin@nationalponysociety.com

Closing date for applications: Friday 14th December 2020