**Orthoptic Education Fund**

Application Form

1. Applicant’s details

Name:

Address:

Telephone:

Email:

BIOS Membership Number:

Place of work or study:

2. Grant details

a. Amount Requested

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b. What will the grant be used for? (max. 150 words)

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c. How will this grant advance the study or practice of orthoptics? (max. 150 words)

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d. Have you made an application to any other organisation for funding?

Please provide details.

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e. Have you submitted a letter of support from your line manager or academic tutor?

 Yes [ ]  No [ ]

Please provide reason if you are unable to provide a letter of support.

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I have read the terms and conditions (available on the BIOS website) and if my application is successful, I agree to abide by them.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return application forms to oef@orthoptics.org.uk**