

Internship 2020-21

Support with costs for full time undergraduate students who wish to undertake a period of voluntary work experience.
Deadline for applications: 06/11/20 & 05/03/21 & 08/05/21

Please complete the form in full as we will not consider an application form that is not fully completed and does not have all the required supporting evidence.

Help with filling out the application form is available from Student Services.

SECTION A: Your Personal Details

Title:	
Full Name:	
Date of Birth:	
Student Number:	
Home Address:	
Term Address:	
E-mail Address:	
Telephone No:	

SECTION B: Course Details

Course Title:								
Campus								
Level of study	Full Time		Part Time		Undergraduate		Postgraduate	
Year of course	1		2		3		4	
Start date (mm/yy)			End date		Resitting the year?	Yes / No		
Country of birth	UK		EU		Other (please note):			
How are your Tuition Fees being paid? (self-funding / Student Finance)								

SECTION C: Bank Details - Please write clearly to ensure payment can be made correctly

Bank	
Sort Code	
Account number	

SECTION D: Funding

Do you receive funding from any other source? e.g. Local Authority support / Private scholarships / Trust Fund	Yes	
	No	
Please give details		

Section E: Personal Statement

Please use this section to outline the Internship activity you wish to undertake, including the name and nature of the host company, the duration of the Internship and your objectives. If you have any correspondence from the company arranging or confirming your Internship, please provide copies with your application. You will also need to submit a breakdown of your estimated costs.

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SECTION F: Student Declaration

- I confirm that all the information on this form is correct. I understand that giving false information may lead to rejection of my application and steps being taken to recover any payment made to me from the Scholarships and Bursaries Fund. I understand that for administrative purposes my information will be held on a database.
- I have enclosed the relevant documentation as requested and understand that if an item is missing or incorrect, my application may be delayed or rejected.
- I accept that the University reserves the right to request further information from me or clarification on the information supplied.
- I will inform you immediately of any changes to the information provided.

Print Name:	
Signature:	
Date:	

Please return your completed application form to the relevant Student Finance Officer:

Lampeter Campus:

Lynda Lloyd-Davies, Student Services
l.lloyd-davies@uwtsd.ac.uk

Tel: 01570 424 722

Swansea Campuses:

Sharon Alexander, Student Services
sharon.alexander@uwtsd.ac.uk

Tel: 01792 481 123

Carmarthen & all other campuses:

Delyth Lewis, Student Services,
d.lewis@uwtsd.ac.uk

Tel: 01267 676 947

Office Use Only:

Evidence:	SLC:	B/S	Other