

## RHS BURSARY APPLICATION



# THE DAWN JOLLIFFE BOTANICAL ART BURSARY TRAVEL APPLICATION

*[Preference will be given to botanical artists who are not yet established]*

**PLEASE READ THESE IMPORTANT NOTES BEFORE COMPLETING THE APPLICATION FORM**

- Please note: Submission of an application to the *RHS Bursaries Advisory Committee* is dependent upon notification from the *RHS Picture Committee*\* that applicant's botanical artwork is of the required standard and an applicant may be requested to submit 4 examples of work for assessment.
- Applications for travelling to draw or paint plants in their habitats will be considered at any of the four *RHS Bursaries Committee* meetings held in **February, May, August and November** – the closing dates for which are 15 December, 31 March, 30 June and 30 September respectively.
- This form must be clearly handwritten or typed.
- All supporting papers must be presented as single-sided copies on A4 – unstapled and unbound.
- Artists resident outside the British Isles may only undertake projects within the British Isles.
- Full curriculum vitae must be attached. Please ensure that at least one of your referees is a professional botanical artist who can vouch for you regarding the standard of your botanical artwork.

**ALL PARTS OF THE FORM MUST BE COMPLETED. Failure to do so will result in the form being returned.**

## 1. PERSONAL DETAILS:

Surname: \_\_\_\_\_ First Names: \_\_\_\_\_

Dr ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other \_\_\_\_\_

Address for correspondence: \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Address of Residence: \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Tel. Number : \_\_\_\_\_ Fax No: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Occupation: \_\_\_\_\_

*(Give job title, employer or if self employed, retired or student)*

Details of art course/college attended (if any) with date(s) and standard/qualification obtained:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NB: Please include a copy of your passport/driving licence photograph with your application.**

\* Full details from The Secretary, RHS Picture Committee, 80 Vincent Square, London SW1P 2PE, Tel: 0207-821-3051  
e-mail: [picturelibrary@rhs.org.uk](mailto:picturelibrary@rhs.org.uk)

## 2. PURPOSE OF APPLICATION *(Full details of your project with itinerary attached on a separate sheet)*

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**3. COUNTRY AND LOCATION(S) TO BE VISITED**

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**4. DURATION**    Start Date: \_\_\_\_\_ Completion date: \_\_\_\_\_

**5. NAMES OF OTHERS ACCOMPANYING YOU:**

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**6. NAMES AND ADDRESSES OF PERSONS CONSULTED ABOUT THE PROPOSAL**

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**7. PERSONAL REFEREES** *(Two persons, other than relatives, who have known you for at least two years and are able to provide knowledgeable opinion in support of your proposal.)*

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Occupation: _____	Occupation: _____
Tel: _____	Tel: _____
E-Mail : _____	E-Mail : _____

**NB:** *Applicants are requested to contact their referees well in advance of submitting their application form, in order to obtain agreement to their names being put forward.*

**8. SUMMARY OF ESTIMATED COSTS** *(Details must be provided separately with photocopies of quotations).*

<b>a) Travel</b>		
Air Fare:	£	[Column for office use only]
Bus/Train:	£	
Car Hire:	£	
Mileage (@ 10p per mile)	£	
<b>Total Travel costs</b>	£	
<b>b) Administration</b>		
Insurance:	£	
Visa:		
Permits:		
<b>Total Administration costs</b>	£	
<b>c) Subsistence</b>		
Accommodation:	£	
Food/Stores :		
<b>Total Accommodation /Subsistence costs</b>	£	£
<b>d) Essential equipment / consumables</b>		
<b>Total equipment costs</b>	£	£
<b>e) Other costs</b>		
_____		
_____		
_____		
<b>Total Other Costs</b>	£	£
<b>g) TOTAL ESTIMATED COSTS (a+b+c+d+e)</b>		
	£	
<b>h) ESTIMATED OTHER GRANTS (Please insert details in box 10 on page 4)</b>		
	£	£
<b>i) PERSONAL CONTRIBUTION</b>		
	£	£
<b>j) RHS BURSARY AWARD SOUGHT (g minus(h+i)) (N.B: Up to a maximum of £500)</b>		
	£	£

**9. PERMITS/INSURANCE/LICENCES** (*Photocopies of permits must be attached. Answer each section*)

Held for this project as applicable:

A valid passport?

Yes ☐ No ☐ Not applicable ☐ In process ☐

A valid driving licence

Yes ☐ No ☐ Not required ☐ In process ☐

A visa for travels?

Yes ☐ No ☐ Not applicable ☐ In process ☐

Valid health insurance?

Yes ☐ No ☐ Not required ☐ In process ☐

**10. OTHER GRANTS/FINANCIAL CONTRIBUTIONS** (*Attach photocopies of details where relevant*)

Other organisations or sponsors to whom application for grants for this project have been made:

a) \_\_\_\_\_

Amount Requested £\_\_\_\_\_ Successful? Yes ☐ No ☐ Awaiting Response ☐

b) \_\_\_\_\_

Amount Requested £\_\_\_\_\_ Successful? Yes ☐ No ☐ Awaiting Response ☐

c) \_\_\_\_\_

Amount Requested £\_\_\_\_\_ Successful? Yes ☐ No ☐ Awaiting Response ☐

**11. DECLARATION** (*To be completed by the applicant*)

I confirm that the information given on this form and in supporting papers is, to the best of my knowledge and belief, true and accurate. I agree that the Society may use material contained in my report for publicity purposes.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Completed Application Forms and accompanying papers should be sent to *The Secretary of the RHS Bursaries Committee, Wisley, Woking, Surrey, GU23 6QB***

**The personal information provided on this application form will be used for processing your application and may be shared with other grant giving bodies, but otherwise will be held in confidence by the RHS and not divulged to any other third party without your consent. The granting of an RHS Bursary conveys no responsibility for the welfare of the project/expedition participant.**

c:/Dawn Jolliffe Bursary Application Form/Feb 2009