

Application Form – The Instructors Development Scholarship



BHS Approved Centre:.....

Student Instructor Name: **BHS Membership Number:**

Date student will start training:

Name of Mentor:

Qualifications (proposed date of BHS exams) :

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Please state details of any other bursary the applicant has received:.....

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Please state why you feel that the applicant and centre would benefit from The BHS Instructors Development Scholarship:

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Please state why you think the BHS should choose this application and this student for this scholarship:

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