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DEPARTMENT OF CULTURE

**APPLICATION FOR EDUCATIONAL GRANT  
(STUDENTS ONLY)**

Please submit printed application to:

**Bermuda Arts Council**  
Government Administration Building  
30 Parliament Street, 3rd Floor  
Hamilton, HM 12

Or submit a digital application to:

Email: [artscouncil@gov.bm](mailto:artscouncil@gov.bm)

**APPLICATION DEADLINES:**

For courses beginning August/September: **May 31<sup>st</sup>**

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Mailing Address: P.O. Box HM 886, Hamilton HMDX  
Telephone: 441.292.1681 | Email: [artscouncil@gov.bm](mailto:artscouncil@gov.bm) | Visit Our Website >

## **CRITERIA GOVERNING STUDENT EDUCATIONAL GRANTS**

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### **ELIGIBILITY - STUDENT APPLICANTS**

#### **AGE:**

No Restriction

#### **CRITERIA:**

1. Applicants must demonstrate interest, aptitude and artistic merit in their chosen arts discipline.
2. Applicants must demonstrate financial need.
3. Applicants must be accepted into an arts course of study by an accredited University, Polytechnic or College of further education.
4. Applicants must be Bermudian.
5. Students who do not achieve passing grades will not be eligible for further awards until they achieve passing grades.

#### **SELECTION:**

Bermuda Arts Council (BAC) will consider the financial need, past demonstration of aptitude of applicants in their artistic discipline. BAC reserves the right to withdraw the Award in the event of unsatisfactory work or conduct. All applications will be considered in a fair and equitable manner and according to BAC's means at the time of the application. All decisions of BAC are final.

#### **CONDITIONS OF APPLICATION:**

1. Only official applications submitted with all necessary documentation will be considered.
2. Applicants may only apply for one (1) grant per academic year.
3. Grant applications will not be reviewed without your most recent academic transcript.
4. All information is held in strict confidence.

#### **CONDITIONS OF AWARD:**

1. The Council's assistance must be acknowledged in any public interview, presentation or print format (if applicable).
2. Student Grant Recipients shall provide regular updates on academic progress to the Council (i.e., at the end of the academic year or end of course).
3. Any students who drop out of or fail their course must notify the council immediately.

#### **INTERVIEW:**

BAC will interview short-listed candidates in June/July

***Please note that Bermuda Arts Council reserves the right to deny financial assistance, to publicly state their assistance and may offer guidance in lieu of financial awards.***

**FOR OFFICIAL BAC USE ONLY**

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**BAC RESPONSE – STUDENT APPLICANTS**

FOR OFFICIAL BAC USE ONLY	
<b>Amount Requested:</b>	<b>Amount Awarded:</b>
<b>Accepted:</b>	<b>Reason:</b>
<b>Declined:</b>	<b>Reason:</b>
<b>Comments:</b>	
<b>Date:</b>	
<b>Officiated By:</b>	<b>BAC Position:</b>

# APPLICATION FOR STUDENT/EDUCATIONAL GRANTS

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## PERSONAL INFORMATION

**1. Applicant's Name in Full**

\_\_\_\_\_

*Last*    *First*    *Middle*

**2. Place of Birth** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Sex: M/F** \_\_\_\_\_

**3. Date of Birth:** *Day* \_\_\_\_\_ *Month* \_\_\_\_\_ *Year* \_\_\_\_\_

**4. Telephone:** *Day* \_\_\_\_\_ *Evening* \_\_\_\_\_ *Cell* \_\_\_\_\_

**5. Bermuda mailing address:**

\_\_\_\_\_  
\_\_\_\_\_

**6. Overseas mailing address (if already obtained):**

\_\_\_\_\_  
\_\_\_\_\_

**7. E-mail address (accessible overseas):**

\_\_\_\_\_

**8. Chosen art form:** \_\_\_\_\_

**9. Purpose of funding:**  Overseas Study  Local Course

**10. Name of intended place of study:** \_\_\_\_\_

**11. Name of intended course of study:** \_\_\_\_\_

**12. Degree or qualification sought:** \_\_\_\_\_

**13. Duration of program:** \_\_\_\_\_ **Anticipated graduation date:** \_\_\_\_\_

**14. State your career goal:** \_\_\_\_\_

\_\_\_\_\_

**PERSONAL INFORMATION CONTINUED**

**15. Name of any previous institutions of study for your art form:**

\_\_\_\_\_

\_\_\_\_\_

**16. Amount Requested: (BM\$):** \_\_\_\_\_

**17. Deadline for when funds are required:** \_\_\_\_\_

**18. Academic History:**

Current School (if applicable): \_\_\_\_\_

Educational Background:

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

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

Qualifications Earned (where applicable):

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

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

**19. Honours or Awards (where applicable)**

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

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

**20. Performance or Display History**

a) Please include any notable past performances of displays of works or talent:

Type of Event 1: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Type of Event 2: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Type of Event 3: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Event: \_\_\_\_\_

**PERSONAL INFORMATION CONTINUED**

b) Please include any notable performance honours or awards:

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

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

**EXTRACURRICULAR INTERESTS, HOBBIES AND PERSONAL ACTIVITIES**

**21. Community Involvement**

Applicants should demonstrate their involvement (or commitment to be involved) in a community programme should they be granted an Education Award.

**Community Project:**

\_\_\_\_\_

Programme Contact for Reference: \_\_\_\_\_

Contact Details of Reference: \_\_\_\_\_

**22. Work Experience (if applicable):**

Year: \_\_\_\_\_ Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Year: \_\_\_\_\_ Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

**23. Past Awards from Bermuda Arts Council:**

Is this your **FIRST** request for a BAC Grant of any kind?  Yes  No

How many past BAC Grants received: \_\_\_\_\_

Year Awarded: \_\_\_\_\_ Amount: \_\_\_\_\_

Purpose of Grant: \_\_\_\_\_

How was Grant used?: \_\_\_\_\_

Year Awarded: \_\_\_\_\_ Amount: \_\_\_\_\_

Purpose of Grant: \_\_\_\_\_

How was Grant used?: \_\_\_\_\_

**EXTRACURRICULAR INTERESTS, HOBBIES  
AND PERSONAL ACTIVITIES CONTINUED**

**24. Other Scholarships/Awards Applied for this Year:**

Scholarship/Award Name: \_\_\_\_\_ Amount: \_\_\_\_\_

Scholarship/Award Name: \_\_\_\_\_ Amount: \_\_\_\_\_

**25. Written Statement (incorporating the following):**

- a. Brief explanation of purpose of grant and career goals
- b. Biography of yourself including an outline of your level of experience and/or prior engagements or involvement in your chosen art form (attach any certificates to confirm)
- c. Why you feel you are a good candidate for this grant
- d. How you intend to benefit Bermuda with the knowledge that you gain

**Supporting Documents:**

Please attach to the application any supporting documentation (including grades).

**SIGNATURE OF APPLICANT**

**Signature of Applicant:** \_\_\_\_\_

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

**PARENT'S/SPONSOR'S CONFIDENTIAL  
ANNUAL HOUSEHOLD INCOME & EXPENSE FORM**

GROSS ANNUAL INCOME		ANNUAL EXPENSES	
<b>Wage Earner 1</b>		Rent	
Name:		Mortgage	
Relationship to Applicant:		Land Tax	
		House Insurance	
<b>Wage Earner 2</b>		House Maintenance	
Name:		Loans	
Relationship to Applicant		Electricity	
		Telephone	
Part-time Employment		Other Utilities	
		Food	
Other income (specify)		Clothing	
		Local Transportation	
		Life Insurance	
		Car Insurance	
		Miscellaneous	
<b>TOTAL HOUSEHOLD INCOME</b>	<b>\$</b>	<b>TOTAL EXPENSES</b>	<b>\$</b>

Describe briefly any other family or personal circumstances, if any, which influence the ability to meet the applicant's educational expenses (e.g. illness, unemployment, disability, etc.):

\_\_\_\_\_

**STUDENT'S ANNUAL EDUCATIONAL BUDGET & INCOME**

INCOME FOR EDUCATION		EDUCATION EXPENSES	
Scholarships		Tuition	
Awards		Housing	
Family Assistance		Meals/Food	
Personal Contribution (savings)		Books and Supplies	
		Travel (airfare)	
		Transportation (within study destination)	
		Other (specify)	
<b>TOTAL HOUSEHOLD INCOME</b>	<b>\$</b>	<b>TOTAL EXPENSES</b>	<b>\$</b>

**TOTAL AMOUNT REQUESTED (BD\$):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_



## CHECKLIST OF REQUIRED SUPPORTING DOCUMENTS FOR STUDENT APPLICATIONS

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**Please Note:** Only **COMPLETE** Application forms with all supporting documentation will be considered.

	DOCUMENT REQUIRED	PROVIDED
1.	Signed Completed Application form	
2.	Copy of Official course outline and syllabus	
3.	Copy of Official acceptance letter from program of study	
4.	Copy of Proof of Registration (when available)	
5.	Official statement of tuition fees	
6.	Student's Annual Educational Budget & financial statement	
7.	Outline of Other Sources of Educational Income (including other	
8.	Confidential Parental/Sponsor financial statement (including Annual Household Income)	
9.	Proof of Bermudian status	
10.	Copy of Birth Certificate	
11.	Certificate of Good Health from applicant's physician	
12.	Most recent official transcript	
13.	Reference Letter from applicant's teacher (in chosen art form)	
14.	Academic reference letter	
15.	Written Statement	
16.	Portfolio/Samples of Work (e.g. DVD, CD, copies of paintings etc)	
17.	Evidence of how past Grants were used (including past grades)	

**If the candidate is successful:**

18.	Update letter on success of the course	
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