



The Martin Sheridan
Memorial Bursary 2024



Application Form

(4 copies must be submitted)

Personal Details of Nominee

Please tick one box:		
Male Athlete	<input type="checkbox"/>	Female Athlete <input type="checkbox"/>
Name:		Date of Birth:
Home Address:		
Phone Number (home)	Mobile:	Email:
Secondary School Attended:		
Your Sport:		
Current Status: (please tick)	Employed	Student Unemployed
If employed state the Name, Address and Telephone number of present employer:		
Job Title:		
If Student state Name, Address, Telephone Number of College/Institute:		
Course title and year attending:		
If Unemployed state details of previous employment or courses attended:		

Your Club or Organisation

Name of Club Secretary:

Address of Club or Organisation:

Home Telephone Number:

Mobile Number:

Email Address:

History of Applicant

Please give a short history, including dates of nominees involvement in sport:

Is nominee a member of a training panel?. (If yes, please state)

Has nominee represented their sport at National and International Level?

Competitions participated in:

Personal bests or records broken:

Breakdown of Bursary Grant Required i.e. Training, Travel, Education, Equipment etc

Total	

Grant Aid Applied for/or received from other Sources

Source i.e. Sponsorship Governing Body etc.	Amount (€)	Date

Additional Information which may support your application e.g. press cuttings (letters may be attached)

Additional Qualifications which may support your application e.g. Code of Ethics, First Aid etc.

I certify that the above information is correct.

Signed: (nominee) _____ Date: _____

Signed on behalf of club or organisation: _____

Appointment/Position: _____ Date: _____

Please do not enclose any original documentation with your application, copies only as all submissions will be destroyed after selection process has taken place.

*All Applications to be returned by 5pm on Friday 10th May 2024 to:
The Sheridan Memorial Bursary Committee, Bohola, Claremorris, County Mayo.*