DEPARTMENT OF PATHOLOGY
UNIVERSITY OF CAMBRIDGE

Graduate Student Hardship Award Scheme

Applicants should read the accompanying *Notes of Guidance* before completing this form.

Full name	Email	College

Supervisor	Current address

Country in which you are ordinarily resident (when not at Cambridge)	

Registration Date	Period for which you seek financial support

State the purpose for which you seek a Hardship Award

When do you expect to submit your thesis?

Please provide the following financial information in relation to the period applied for

Expenses: University Composition Fee …… ..….. £_____

College Fee …… ..….. £_____

Food and Accommodation …… ..….. £_____

Other (please specify) …… ..….. £_____

Total expenses for period applied for …… …… £_____

Income: Please give full details of all sources of income for the period (including income from other awards)

£_____

Please state the sum you seek through this application: £_____

Please explain why your original source of funding is now inadequate or unavailable.

Please state all other sources of funding to which you have applied for the period and, where known, the outcome of the application. Where the outcome is not yet known, please indicate when you expect to hear the result

I confirm that the information I have given in this application is complete and true

Signature: Date:

Please email your completed application to postgrad@path.cam.ac.uk. Applications will be considered on a case by case basis by the Postgraduate Education Committee.