

 **Application for**

 **Dr Peter Davies Scholarship in French Studies**

Academic Session 2025-26

**N.B. Applicants must hold a conditional or unconditional acceptance to study before being considered for this Scholarship**

**Student Application Checklist:**

**Part 1: Applicant Information**

**Part 2: Research Proposal/Statement of Purpose**

**Part 3: Subject/School statement of support**

**Additional Attachments: required for nominations to Award Committee**

**A. Copy of application for study (can be supplied by subject area)**

**B. 2 academic references (can be supplied by subject area if same as those used in application for study)**

***It is the applicant’s responsibility to ensure that the complete scholarship application is delivered electronically to*** ***SMLC-PGScholarships@glasgow.ac.uk*** ***by 30th May 2025.***

**PART I: Information about the applicant**

**Name**

|  |  |  |
| --- | --- | --- |
| **Title** | **First name(s)** | **Last name** |
|  |  |  |

|  |  |
| --- | --- |
| UK or EU or equivalent status |  |
| International student |  |
| If not UK/EU – visa status in UK |  |
| Country of Permanent residence |  |

##### CORRESPONDENCE ADDRESS ALTERNATIVE ADDRESS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Valid to: |  | From: |  | To: |  |
| Address |  | Address |  |
| Address |  | Address |  |
| Postcode |  | Postcode |  |
| Country |  | Country |  |
| Telephone: |  | Telephone: |  |
| Email Address: |  | Email Address: |  |

**Career in higher education to date**

|  |  |
| --- | --- |
|  | **Undergraduate degree** |
| Name of university and/or collegeCountry (if not UK) |   |
| Mode of attendance (please indicate) | Full-time**[ ]**  | Part-time**[ ]**  |
| Month and year in which your programme started and finished (or will finish) | Start datemm yy | End datemm yy |
|  |  |  |  |
| Qualification and title of award(e.g. MA History) |  |
| Degree classification (where awarded) |  |

##### Professional experience that is *relevant* to this application (please skip if not relevant)

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** **(month and year)** | **Full or part-time?** | **Employer/Organisation****(including location)** | **Status and responsibilities** |
| **From** | **To** |
|  |  |  |  |

**Proposed research project**

|  |
| --- |
| **Please give a brief title for your proposed programme of research** |

|  |
| --- |
| **Research Proposal****Word count (note: this should be no more than 1,000 words):** |

|  |
| --- |
| **Statement of support from prospective supervisor or programme convener** (Word count: no more than 500 words) |

**Your referees**

Please complete the referees' contact details below.

**Is this referee indicated on your application for study? Yes. No.**

If Yes: the reference already supplied will be considered as part of this application,
if No: please request the referee send a reference to the School by the closing date.

**Referee 1**

|  |  |
| --- | --- |
| Name (block capitals) |  |
| Contact telephone number |  |
| Contact e-mail address |  |
| Institution/Organisation |  |
| Position |  |
| Contact address |  |

**Is this referee indicated on your application for study? Yes. No.**

If Yes: the reference already supplied will be considered as part of this application,
if No: please request the referee send a reference to the School by the closing date.

**Referee 2**

|  |  |
| --- | --- |
| Name (block capitals) |  |
| Contact telephone number |  |
| Contact e-mail address |  |
| Institution/Organisation |  |
| Position |  |
| Contact address |  |

Applicant's declaration

I confirm that the information I have provided in Part I of this form is complete and accurate to the best of my knowledge at this date.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Date** |  |

***It is the applicant’s responsibility to ensure that the complete scholarship application is delivered electronically to*** ***SMLC-PGScholarships@glasgow.ac.uk*** ***by Friday, 30th May 2025.***