# Des Rubens and Bill Wallace Grant – Application Form

**The Des Rubens Bill Wallace grant was set up to give people the opportunity to seek out life-changing experiences in wild places of the world in ways which will benefit both the person, and the wild places themselves.**

The Grant committee will favour independent self-led experiences over commercial expeditions, or pre-paid/charity trips such as pay to volunteer expeditions where the funds go directly to another organisation rather than the individual applying. Priority will be given to individuals whose financial need is greatest and grant recipients will be required to provide a short project report following their return. Applicants must have a Scottish interest/link.

Please complete the application form as fully as possible keeping your answers within the word limits as brevity and clarity improve your chance of success.

Applications close 15th January.

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| Name:  Address:  Tel No:  Mobile No:  E mail:  Tell us about yourself:  Describe your Project (one sentence please):  Purpose of your Project (one sentence please):  Where are you planning to go?  Start and duration:  Depart: Return:  Team size or just you:  £  Anticipated Total Team cost:  £  Anticipated Total cost to you:  £  Sum requested from The Grant: |
| Why I/we wish to undertake this Project: (limit 200 words) |

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| How I/we propose to undertake this Project: (limit 200 words) |
| The total budget for the project, and details of funds already awarded/applied for or raised by yourself/team: |
| Project timetable: |
| Describe the charitable, education or scientific benefits of your Project.  (limit 200 words) |
| How you think your Project will change your life? (limit 200 words) |

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| How might this Project benefit wild places? (limit 200 words) |
| How you think that your Project will benefit other people.  (limit 200 words) |

**Please include below the name and contact details of one referee that we can contact about your application – for example: teacher, lecturer, leader, guide, colleague etc. (preferably not a family member).**

Name:

Relationship with referee (Teacher/Lecturer/Guide):

Contact details:

Tel:

Mob:

Email:

Please tell us how you heard about the Des Rubens and Bill Wallace grant:

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**Please sign and date the form before submitting.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Applications should emailed to:**

drbwgrant@johnmuirtrust.org

**Or mailed to:**

The Des Rubens and Bill Wallace Grant

c/o The John Muir Trust

Tower House

Station Road

Pitlochry,

PH16 5AN

**Annual closing date for applications is 15th January**.

Further information can be found at www.johnmuirtrust.org/DRBWG

John Muir Trust, Scottish Charity No.SC002061, Company No.SC081620

Registered Office: Tower House, Station Road, Pitlochry, PH16 5AN Scotland