

Institution Application for Approval

Please note that we will ask you to update this form at least every three years.

Details About Institution Name Address Telephone Code & Number Fax Code & Number Head of Institution Name & Title Name of Bank Bank Address Account Number Sort Code BIC/Swift Code IBAN Number **Proposed Use of Grants** Please identify the broad purposes for which you seek BSUF's support in raising funds. More than one category can be selected: □ Other ☐ Bursaries ☐ Construction ☐ Fellowships ☐ Renovation ☐ Endowment ☐ Scholarships Please describe, in detail, the projects you intend to pursue, and indicate your fund-raising goals (in f, or local currency), for each category. For example, if you checked "Scholarships," please describe the type(s) of scholarship; if "Construction", please specify the kind(s) of project(s). IRS Regulations do not permit grants to foreign organizations for general operating expenses. **(1)**

Updated September 2018



Your Fundraising Plan

1. Over what period will funds for this (these) projects be raised?
2. How will the project(s) strengthen U.SCommonwealth educational, scientific or literary ties?
Your Connections in the US
3. Please describe your institution's prior connections with the U.S.
4. How many alumni/ae or associates reside in the U.S.?
5. Do you have an association of alumni/ae and associates?
6. What else have you done to obtain U.S. or local funds from individual donors or businesses?
7. From governments, foundations or other sources?
8. Have you launched a fundraising appeal? \Box Y \Box N 9. When started?
10. What progress has been made?
11. Further remarks

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Points of Contact

12.	Tho is primarily responsible for development and/or fund-raising?			
	Name			
	Γitle			
	Email			
	Γelephone Code & Number(s)			
	Tho is your U.S. Representative (we require you to appoint a Representative in the U.S. to help you ze support for your appeal)?			
	Name			
	Address			
	Email			
	Γelephone Code & Number(s)			
14.	o whom should we send donation notifications?			
Name				
	Γitle			
	Address			
	Email			
	Telephone Code & Number(s)			
•				
	Authorised Signature			
	Printed Name			
	Date			

Please email your completed application form to exec@bsuf.org or send by mail to: British Schools & Universities Foundation, 575 Madison Avenue, Suite 1006, New York, NY 10022-2511, US.

FOR B.S.U.F. OFFICE USE ONLY NOTE: DATE:

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