**LISA ULLMANN TRAVELLING SCHOLARSHIP FUND
DANCER IN TRAINING AWARD APPLICATION FORM – OFFLINE VERSION**

To apply for a LUTSF’s Anna Carlisle Dancer in Training Award, please complete our application form. Please carefully read [How To Apply](https://lutsf.org.uk/dancer-in-training-award/) and refer to the [Frequently Asked Questions](https://lutsf.org.uk/training-award-faqs/) page for help.

**Before you start…**

* **Budget Template:** You will be asked to attach this to your application. Please download here**:** **[**[**budget-template-Download**](https://lutsf.org.uk/wp-content/uploads/LUTSF-Budget-Template-2025.docx)**]**
* **Increasing Access:** We can provide support to remove barriers and improve access for applicants to the awards. If this might help you, please read this info sheet:

**[**[**Access-Info-Sheet**](https://lutsf.org.uk/wp-content/uploads/LUTSF-Access-Info-Sheet-25.docx)**]**

**Section 1 – Introduction**

Thank you for your interest in applying for a LUTSF’s Anna Carlisle Dancer in Training Award. We look forward to hearing about your projects and plans!

We don’t want to waste your time, so before completing the application please ensure you meet these **eligibility criteria**:

[x] You are 18 years of age or older

[x]  You have been resident in the UK for at least 2 years

[x]  You are planning a project that requires travel and is ***not*** your regular term-time training costs

**If you tick all these boxes, we warmly welcome you to fill out the form. This new form takes into account recent feedback requesting a shorter form with more concise answers. If you have further suggestions for how we might make the form more accessible, please do so here:**

**[**[**Accessible Applications Survey**](https://forms.office.com/e/yQ56ig8KrP)**]**

**You can submit a digital or printed version. This is the printable/offline version.**

**If applying using this form, please scan and/or email it to** **info@lutsf.onmicrosoft.com** **by the closing date 16 November 2025.**

**Section 2: Contact Details**

**Your Name:**

**Your Address:**Line 1

Line 2

Line 3

County

Postcode

**Contact Email address:**

Access Support: If you are working with a Support Person to complete your application please read the Access FAQs about how to answer these questions.

**Telephone No:**

**Do you have any access requirements relating to how we communicate with you that we need to know about? If so, please tell us here:**

**SECTION 3 – YOUR APPLICATION**

**In the box below, please share some information about your dance background and current training (maximum 450 words).**

We understand that dance training can take many forms. We use this question to understand your dance background and how a LUTSF Award may benefit you at this stage in your development. We want to understand how your training connects with the project you want to undertake and how you connect to the dance community.

You could tell us about things like:

* Your training
* Past projects
* Current projects or dissertation plans

We understand that you might have a wide range of relevant experiences, but please prioritise elements which are most important to your application.

max. 450 words

**In no more than 50 words*,* pleasesummarise your project – what do you want to use a LUTSF Award to travel for and why?**

This information may be used for publicity so please aim to describe your project clearly, briefly and accurately.

max. 50 words

**Tell us where you want to travel to:**

You can enter up to 2 destinations here.

(country)

(town/city)

**Destination(s):**

(country)

(town/city)

**Tell us the full estimated cost of travel to/from your destination(s) above
We can contribute up to £500 in GBP £**

This number has to match Section A in your budget attachment.

£

**How much of this are you requesting from LUTSF?**

We can contribute up to £500 in GBP £

£

**Estimated travel dates:**

**Departing** DD/MM/YY

**Returning**  DD/MM/YY

Please give your best current estimate. Dates may be changed before travel is booked.

**Access: If you require an Access Support Worker to travel with you due to your access needs, LUTSF will pay for their travel in addition to yours.**

If this applies to you, please tick here[ ]

**Section 4: More Details About Your Project And Why You Want To Do It.**

1. **Preparation & Planning:**

**In more detail, tell us about your project (max 400 words).
Please clearly explain:**

* what your aims and activities are.
* any preparatory work you have done,
* any contacts you have made, and
* the reasons for choosing your collaborators/destination organisation(s).

1. **Benefit:**

**What are your reasons for undertaking the project? How will this relate to your current training or studies? (max 400 words).**

Please outline how the project relates to your training and will contribute and inform your professional practice. Please also highlight any plans you have to share your learning after the project has taken place.

Max. 400 words

1. **BUDGET**

[ ]  **Please make sure you send us your completed budget attachment when you return this form.**

**Section 5: Supporting Your Application**

**REFEREE**

**Please enter a name and email address for one referees, who should know you in a professional capacity.**

We may contact your referee if we need further information about your application. Your referee must not be applying for a LUTSF Award this year.

**Referee Name**

**Referee Email Address**

 **How they know you**

**Please attach a letter of support from your referees when you submit your application.**

**ESSENTIAL ATTACHMENTS**

**To complete your application, we also need you to attach:**

1. **Evidence of your planning e.g. screenshots of your travel quotes for your estimated dates and location from a travel provider.**

[This should match the figures for Section A, travel costs used in your budget template]

1. **A letter of support, invitation and/or confirmation from your destination host.** If you've applied for a place on a course or summer school and do not yet have an outcome, please provide proof of your application e.g. emails.

**Section 6: About You**

LUTSF welcomes applications from people of all backgrounds, resident in the UK and over 18. However, to help us build an accurate picture of who’s applying for our funds and to make sure that we are reducing barriers to access in line with our diversity aims, and not discriminating under the Equality Act 2010, we ask all applicants to complete the following questions:

**Gender:**

**Man** [ ]  **Woman** [ ]  **Intersex** [ ]  **Non-binary** [ ]  **Prefer not to say** [ ]

If you prefer to use your own term, please specifyhere**………………………………..**

**Age:**

**16-24** [ ]  **25-29** [ ]  **30-34** [ ]  **35-39** [ ]

**40-44** [ ]  **45-49** [ ]  **50+** [ ]

**Prefer not to say** [ ]

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box.

***Asian/Asian British***

**Indian** [ ]  **Pakistani** [ ]  **Bangladeshi** [ ]  **Chinese** [ ]  **Prefer not to say** [ ]

**Any other Asian background, please write in:……………………………………………**

***Black/ African/ Caribbean/ Black British***

**African** [ ]   **Caribbean** [ ]  **Prefer not to say** [ ]

**Any other Black/African/Caribbean background, please write in:……………………………………**

***Mixed/multiple ethnic groups***

**White and Black Caribbean** [ ]  **White and Black African** [ ]

**White and Asian** [ ]  **Prefer not to say** [ ]

**Any other mixed background, please write in:…………………………………………**

***White***

**English** [ ]  **Welsh** [ ]  **Scottish** [ ]  **Northern Irish** [ ]  **Irish** [ ]

**British** [ ]   **Gypsy or Irish Traveller** [ ]   **Prefer not to say** [ ]

**Any other white background, please write in:…………………………………………………………...**

***Other ethnic group***

**Arab** [ ]  **Prefer not to say** [ ]

**Any other ethnic group, please write in:………………………**

***Prefer not to say*** [ ]

**Do you consider yourself to have a disability or health condition?**

[ ] d/Deaf, Disabled or have a long-term health condition

[ ] Non-disabled

[ ] Prefer not to say

**Section 7: Before You Submit**

**How did you hear about the Lisa Ullmann Travelling Scholarship Fund?**

**Please complete this final application checklist:**

[x] **Completed application form**

[x]  **Completed budget form**

[x]  **Evidence of planning including dates and travel details**

[x] **Letter(s) of support, invitation and/or confirmation from your destination host**[x] **Letter of support for this project from your referee**

[x] **Please tick this box to confirm that you have read LUTSF's terms and conditions.**

[x]  **Confirm that you are happy to be added to LUTSF’s newsletter.**

**If you are applying using this form, please scan and/or email it to** **info@lutsf.onmicrosoft.com** **by the closing date.**

**Many thanks for your application.**