

Research Grants for the Critical Study of Astrology, Southampton, UK Convenor: Dr. Patricia Harris, PhD, MSc., DFAstrolS., FAPAI,

Convenor: Dr. Patricia Harris, PhD, MSc., DFAstrolS., FAPAI, Deputy Convenor; Mrs. Susan High, MSc., BSc.,: Contact address: 1 Highfield, Twyford, Hampshire, SO21 1QR, UK, Tel: 0044 (0) 1962 713134 www.astrology-research.net

APPLICATION FORM* FOR A GRANT TOWARDS STUDENT REGISTRATION FEES AT UK UNIVERSITIES/ACADEMIC INSTITUTIONS

(*Please download and complete, and post to the above address with the required documents).

The RGCSA will consider applications for a grant towards research projects where astrology forms a component part of any project and where the project contributes towards either of the following

- the student is registered for a UK based Master's degree (MA or MSc)
- the student is registered for a UK based doctoral degree (PhD)

PhD OR RESEARCH FELLOWSHIP APPLICATION FORM

This application form (IN QUADRUPLICATE) must be accompanied by:

- 1. A summary of the applicant's research proposal, which is no more than 1,000 words in length (excluding references, bibliography and tables).
- 2. a one-page outline of future career intentions (IN OUADRUPLICATE)
- 3. two 'sealed' confidential referee's reports (ALL IN QUADRUPLICATE).
- 4. A CV listing educational training and qualifications from age 16 years. (ALL IN QUADRUPLICATE)

SECTION 1

1. Surname	(Mr/Miss/Ms/Other)
Forename(s)		
	Postcode	
Telephone Number		
E-mail:		
SECTION 2		
4. *Institution/University at which you a	are studying/researching: (* please delete as ap	ppropriate)
Name of *institution/university		

*College/Faculty
Division
Address
Post code
5. Name of supervisor for the doctoral degree
6. Qualification for which you are registered
7. Title of research topic
8. Please give a brief description of the astrological component of the research
SECTION 3
9. Undergraduate training. Please give the following information:
Name of institution/university at which first degree obtained
Class of degree
Discipline
Year awarded
10. Postgraduate training. Please give the following information:
Name of institution/university at which Master's degree obtained
Discipline
Length of study (months)
Year of completion
PLEASE ATTACH TRANSCRIPT OF MARKS AWARDED
11. What other postgraduate courses have you taken. Give details of courses and any marks awarded

SECTION 4
12. Please list any articles you have had published or have submitted in the last two years . (Give name of journal, title of article, and year)
SECTION 5
13. Please give the name of two referees (other than your Head of Department).
(1) Name
Address
(2) Name
Address
PLEASE ENCLOSE SEALED REFEREE'S REPORTS WITH APPLICATION WHERI APPLYING FOR HELP WITH MSC OR PHD COURSE REGISTRATION FEES.
14. Declaration by applicant.
I wish to apply for a grant from Research Grants for the Critical Study of Astrology, Southampton, UK. In the event of a grant being awarded to me, I agree to provide copies of my research papers resulting from RGCSA sponsored research to the Grants body for its archives and database on completion of the course and/or project and to acknowledge the RGCSA as a source of funding for such research of any published material. I agree to provide interim reports of the progress of research and/or studies for the Grants body on request.
Signed
Date