

 GRANT APPLICATION FORM

 All information will be treated confidentially

**Personal information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |       | Surname |       |
| Adress |       |
| Postal code |       | City |       |
| Telephone |       |
| E-mail |       |
| Bank account/post account number |       |
| Bank’s name and address |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Birth date |       | Nationality |       |
| if Swiss, canton of origin |       | If foreigner living in Switzerland since  |        |
| Residence permit: (chose the corresponding option)  [ ]  B [ ]  C other, specify       |
| Marital status: (chose the corresponding option) [ ]  single [ ]  married [ ]  divorced [ ]  separated |
| Dependent children  |
|  [ ]  yes [ ]  no if yes, how many       |

**Formal education**

|  |
| --- |
| Compulsory schooling:  |
|       | from       | to       |
| Secondary school, high school, apprenticeship, etc:  |
|       | from       | to       |
|       | from       | to       |
|       | from       | to       |
| Universities, other higher education institutions, etc:  |
|       | from       | to       |
|       | from       | to       |
| Diplomas (certificates, high school diploma, etc):  |
|       | from       | to       |
|       | from       | to       |

**Professional dance training**

|  |
| --- |
| Pre-professional training:  |
|       | from       | to       |
|       | from       | to       |
| Professional training:  |
|       | from       | to       |
|       | from       | to       |
| Diplomas:  |
|       |
|       |

**Other training**

|  |
| --- |
| Additional training (specific skills) or training followed in parallel to the work of professional dancer (type and duration):  |
|                 |
| Diplomas |       |
| Mother tongue |       |
| Knowledge of foreign languages:  |
| Spoken |       |
| Written |       |

**Professional activities**

|  |
| --- |
| Main activities in professional dance (employer, work place, duration):  |
|       | from       | to       |
|       | from       | to       |
|       | from       | to       |
|       | from       | to       |
| Last / current employer |       |
| Contract since |       |
| Without work since  |       |
| Have you carried out any professional activity outside of dance, specify:  |
|       | from       | to       |
|       | from       | to       |
|       | from       | to       |
|       | from       | to       |

**Retraining being considered**

|  |
| --- |
| Kind of training:  |
|       |
| Name of the training school/university/institution |       |
| Address |       |
| Contact person |       |
| Email |       |
| Tel |       | website |       |
| Training duration |       |
| Diploma / Title |       |
| Conditions of admission |       |
| Formation costs  |       |
| Have you been accepted? [ ]  yes [ ]  noIf yes, please provide the admission confirmation. If no, specify the reply date        |

**Funding of the considered training**

|  |  |
| --- | --- |
| Amount requested from Danse Transition  | CHF       |
| Own project financing  | CHF       |
| Family support | CHF       |
| Any steps taken at the unemployment office (chômage): [ ] oui [ ]  non |
| Results |  |
| Other steps taken |       |
| Results |  |

**Personal steps taken**

|  |
| --- |
| Professional orientation services (public or private)  |
|       |
| Other consultation services |
|       |
| **I give the Danse Transition committee permission to ask for additional information from** the orientation and advice services, unemployment counsellor and /or former employers (specify name and contact details) : |
|             |

**This form has been filled out truthfully.**

Place       Date       Signature

Please attach the following documents:

[ ]  Motivation letter\*

[ ]  CV

[ ]  Budget

[ ]  Documentation regarding the considered training

[ ]  If possible, confirmation of admission

[ ]  Programme and training calendar

[ ]  Copy of the last decision from the Cantonal tax office

[ ]  Proof of application to a cantonal scholarship in the case of a federally recognized training

[ ]  References and diplomas

This form must be sent by e-mail to**contact@danse-transition.ch**

**\*** Content of motivation letter – max. 1,5 pages

* Short personal description and professional path (max 15 lignes)
* Type of training considered and motivations
* How do you intent to implement it in order to achieve these objectives after the training?
* Explication of the financial situation
* Amount asked