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| **APPLICATION CLOSING DATE: Please refer to the Criminology website.** **Please note that there are DIFFERENT application deadlines depending on the course that you are applying for.** |
| **Surname** |  |
| **Forename(s)** |  |
| **Date of birth** |  | **Nationality** |  |
| **Full postal address and telephone numbers** (*Give both home and term-time addresses if currently a student*) |
| **Home** | **Term** |
|  |  |
| **University**State name of Institution of Higher Education attended and give details of subjects taken and examination results. Mention any distinction obtained and offices held. State all degrees taken: if you have not yet graduated, give the date of your final examination and when the result will be known. |  |
| **Referees**Give the names and addresses of the **three academic referees** to whom you have sent a request for references. It is your responsibility to ask the referees to write directly to the Institute of Criminology. You must include at least one reference from your current academic institution. |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Name** |  |
| **Address** |  |
| **Email** |  |
| **Name** |  |
| **Address** |  |
| **Email** |  |

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| **Proposed course of programme at Cambridge** (Please tick the relevant box) | MSt | [ ]  | MPhil | [ ]  | PhD | [ ]  |
| If you intend to undertake research for the PhD, please attach a copy of your research proposal |
| **Graduate student** | Have you applied to the Postgraduate Admissions Office for admission as a Graduate Student? | Yes | [ ]  | No | [ ]  |
| Have you been accepted? | Yes | [ ]  | No | [ ]  |
| Have you been accepted pending confirmation of financial situation | Yes | [ ]  | No | [ ]  |
| Have you been accepted pending confirmation of other matters? | Yes | [ ]  | No | [ ]  |
|  |
| **Cambridge College** |
| 1. Have you been admitted to a College?
 | Yes | [ ]  | No | [ ]  |
| 1. If not, to which College(s) have you applied?
 |  |
| **Financial Assistance** | Please give a full list of assistance, sponsorships and awards for which you have applied. If possible, state when outcome of the application will be known. Please explain how will you make up for the shortfall (if any)? |
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| What is the amount of funding you are requesting from the Wakefield Fund, and how long would you expect to need this funding? |
|  |
| **Family Circumstances: Information given in this section is treated in strict confidence.** What is the annual income, before tax, of (a) yourself; (b) your parents or guardians (*where relevant*); (c) partner (*where relevant*)? |
| (a) | (b) | (c) |
| Do you have any dependants you support? | Yes | [ ]  | No | [ ]  |
| **In no more than 250 words, please describe why you should receive a Wakefield Fund Scholarship** |
|  |
| **Signature of Applicant** |  | **Date** |  |
| ***Please this form return to:*** The Graduate Administrator, Institute of Criminology, Sidgwick Avenue, Cambridge graduate.administrator@crim.cam.ac.uk  |

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| **REFEREE FORM****IN CONFIDENCE** –To be completed by the referee, then forwarded directly to the address below, by the closing date that is relevant to your course. **Please refer to the Criminology website as there are DIFFERENT application deadlines depending on the course that you are applying for.** |
| The Managers of the **Wakefield Scholarship Fund** are very grateful to those who act as referees and would value a statement about the suitability of this candidate, who must be born or educated in Australia, New Zealand or Canada. The academic standard required for the scholarship is high, and the Managers look for evidence of considerable promise of achievement by successful candidates.A student, if not already a member of the University of Cambridge, will be required to become one before the Michaelmas Term of the year in which s/he is elected, unless specific permission is given to defer to a later term. The value of the award is determined by the Managers at the time of election and in the light of the student’s circumstances and the funds available. |
| **Name of Applicant** |  |
|  |
| **Referee Name** |  |
| **Signature of Referee** |  | **Date** |  |
| **Referee University or College**  |  |
| **Return this form to:**  | The Graduate AdministratorInstitute of Criminology, University of Cambridge, Sidgwick Avenue, Cambridge CB3 9DA**Email:** graduate.administrator@crim.cam.ac.uk  |