**Rainey Endowed Uganda Trip**

**2020 Abaana Project Team Application Form**

|  |  |
| --- | --- |
| Name:      | Year & Registration Group:      |

|  |
| --- |
| 1.What contributions do you believe you could make as a member of the Abaana Project Team? |
|       |

|  |
| --- |
| 2. How would you plan to raise your personal contribution of **at least £650**, **outside school,** towards team expenses and funds for the Project?  |
|       |

|  |
| --- |
| 3. Our trip will involve spending time with children who live on the streets. Give details of any experience you have had in working with children. |
|       |

|  |
| --- |
| 4. Give details of any experience you have had in working as a member of a team |
|       |

|  |
| --- |
| 5. Why would you like to be part of the Abaana Project Team? |
|       |

|  |
| --- |
|       |

Please give the name a teacher in school who would act as your Referee.

**Please ask your parent/guardian to complete the remainder of this form.**

|  |
| --- |
| Outline details of any medical conditions/special dietary requirements concerning your son / daughter. |
|       |

I understand that the cost of the trip will be approximately £1250 (parental contribution) with the commitment to raise at least a further £650 towards team expenses and project funds.

I give permission for my son/daughter to apply for a place on the 2020 Rainey Abaana Project Team.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

­­­

**Return completed Application Form to Mr McClements by 11.00am on Wednesday 11 September 2019.**

**Please note that late Application Forms will not be considered.**

**Interviews if necessary will be held in September 2019**