



Women with Altitude Bursary for MIA Trainees - Application Form

Name:	
Address:	
Email address:	
Mobile number:	
MI membership number:	
Date of MIA registration:	
Date of MIA training (before end of 2016):	
Tell us what stage of MIA training you are at	
Tell us how you intend to use your award once you have passed	
If you are successful, tell us how you would use the bursary	