**[](http://www.hellenicsociety.org.uk/)**

**Society for the Promotion of Hellenic Studies**

**University Grants**

The Hellenic Society Council will consider applications from Universities for a grant to assist an academic event in the field of Hellenic Studies. The grant is up to £2,000 for an academic conference on a research topic concerning any aspect of Hellenic Studies.

All event materials should include the Society for the Promotion of Hellenic Studies logo. Grant holders are required to promote their event on social media. For an event involving a local school there is a parental consent form attached for your own distribution, if required.

Please **email** the completed form and any related documentation by 1ST November to: secretary@hellenicsociety.org.uk

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| **Institution:** |
| **Name of applicant:** |
| **Address:** |
| **Email:** |
| **Contact number:** |

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| **Conference for which a grant is sought:** |

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| **Date or period of conference:** |

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| **Brief description of the conference and any outreach-related activities connected to it:** |

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| **Estimated total cost of conference (please provide a full breakdown on separate sheets if necessary):** |

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| **Amount requested from the Society:** |

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| **Exact purpose for which this amount will be used:** |

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| **Likely contribution of the institution itself:** |

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| **Other funding obtained:** |

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| **Other funding applied for:** |

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| **Is this request likely to be recurrent? :** |

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| **When did your institution last receive a grant from SPHS? :** |
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| **How was the last SPHS-sponsored event advertised? :** |

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| **Date of application:** |

*Please provide/attach further relevant information below.*

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**Society for the Promotion of Hellenic Studies**

**Parental Consent Form**

**Details about your child**

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| **Name:** |

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| **I** (print name)\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, the Parent/Guardian** (please delete as applicable) **of** (name of pupil) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give permission for my child to take part in the event and be photographed, and for the images to be used appropriately on social media, in association with the Society for the Promotion of Hellenic Studies.**  **Parent/Guardian**  **Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |