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| **Astra Zeneca Funded Scholarship Application Form for Postgraduate Conversion Courses in Artificial Intelligence & Data Science:** **MSc Health Data Science 2025/26** |
| Please read the guidance notes and terms and conditions BEFORE completing this application form to check your eligibility. All questions must be answered. Applications should be submitted electronically to e.giorgi@lancaster.ac.uk. Please note that competition for scholarships is high so do ensure that your application is the best it can be. |
| **Personal Details** |
| First Name:  | Surname/Family Name: |
| Date of Birth (dd/mm/yyyy):  |  |
| **Home Address:** |
| House number, Road /Street: | Town/City: |
| County: | Postcode: |
| **Nationality:** |
| Do you hold British nationality? | ☐ Yes☐ No |
| (For non-British nationals only)Do you have EU settled status under the EU settlement scheme? | ☐ Yes☐ No |
| (For non-British nationals only and those who do not hold EU settled status)Do you have indefinite leave to remain,with no restrictions on length of stay?Do you require a VISA? | ☐ Yes☐ No☐ Yes☐ No |
| **Correspondence Address (if different)**  |
| House number, Road / Street: | Town/City: |
| County: | Postcode: |
| **Contact Details**  |
| Phone or Mobile Number: | Email address:  |
| **Scholarship Eligibility Criteria** |
| Tick all that apply | ☐ Female☐ Black (as defined by HESA student ethnicity codes [Student 2018/19 - Ethnicity | HESA](https://www.hesa.ac.uk/collection/c18051/a/ethnic) )☐ Has a registered disability |
| Additional criteria (tick all that apply) | ☐ From indices of deprivation decile 1 to 4\*https://imd-by-postcode.opendatacommunities.org/\*Please enter your postcode and download the spreadsheet, theindices of deprivation will be in column F.☐ Care experienced student ☐ Estranged student ☐ Gypsy, Roma, Traveller ☐ Refugee Child from military family, veteran, partner of military personnel |
| **Course Details (please see guidance notes for list of eligible courses)** |
| ☐ MSc Health Data Science: Lancaster University |
| **Personal statement (500 words maximum**). Please include the following: • Goals and aspirations• Reason for applying for the scholarship |
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I declare that all the information I have supplied in this application is correct. If I am found to have submitted false information, I understand that my application and/or any scholarship award will be discontinued immediately. By submitting this Application Form, I confirm that I have reviewed and accept the terms of the AstraZeneca Funded Scholarship Application for the Postgraduate Conversion Course in Health Data Science at Lancaster University.

**Signature**:……………………………………………………………………….**Date**:……………………………………