



Science Close Up Kit Registration Form 2024-25

School Information School Name: School Address: Telephone Number: **School Staff Contacts** Please provide the names and contact email addresses for the following: (1). Staff member that will accept delivery of kit to your school (2). Staff member that will complete short evaluation survey, after using kit Name 1: E-mail 1: Name 2: E-mail 2: Additional Information Which year groups will use the kit? I have discussed the use of this kit with my Head teacher As a condition of receiving a free kit, I agree to complete a short survey at the end of the school year to help Edina Trust evaluate the impact of the project PRIVACY STATEMENT: The Edina Trust stores the contact information provided on this science kit application form within its legitimate interests as a science grant providing charity. This information will never be shared with, or sold to, outside organisations. The Trust will process the information you have provided for the following reasons: Reviewing and assessing your application in order to make a decision on whether to offer a kit; Contacting you to provide feedback on your application; Retaining these forms for the one year duration of the SCU scheme in your area plus a further 12 months;

When completed please email:

Retaining information confirming your application and our decision in relation to it.

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