

INTERNATIONAL STUDENT SCHOLARSHIP APPLICATION FORM

Please print clearly in English and in BLOCK letters and tick boxes where appropriate.

STUDENT DETAILS

Title:	
First Name:	
Last Name:	
Preferred English Name:	
Date of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Intended School:	
Year Level:	
Email:	

SCHOLARSHIP

<p>Please tick the scholarship that is being applied for:</p> <p><input type="checkbox"/> The AngliSchools Award for outstanding academics</p> <p>Selection Criteria:</p> <ol style="list-style-type: none">1. The last two academic reports2. A 250-word summary of how the student has demonstrated a positive approach to school life and their learning journey to date <p><input type="checkbox"/> New Student Scholarship for excellence in a chosen field</p> <p>Selection Criteria:</p> <ol style="list-style-type: none">1. The last two academic reports2. A 250-word summary of how the student has demonstrated outstanding success in their chosen field/talent and a positive approach to school life and their learning journey to date
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Selection Criteria (Please address the selection criteria in this section)

DECLARATION

I certify that the information provided by me on this application form and the attachments is true, complete and correct.

By signing this application form, I fully understand the conditions under which the scholarship is offered, and if offered a scholarship I agree to:

1. Maintain all conditions applicable to my student visa
2. Abide by all AngliSchools International and school policies and procedures, including the refund and withdrawal policy.
3. Maintain a positive and supportive attitude towards AngliSchools International and the school community.
4. Allow any photos of me in relation to the scholarship to be used in AngliSchools International and school publications and promotions.

Student Full Name:	
Signature:	Date:
Parent/Guardian Full Name:	
Signature:	Date:

Please return this form to Admission team:

AngliSchools International

Level 6, 10 William Street Perth WA 6000

admissions@anglischools.edu.au

OFFICIAL USE ONLY	
Approved by Principal	Name:
Sign:	Date:
Approved by AngliSchools International Director	Name:
Sign:	Date: