

Excellence in Leadership Scholarship Application Form



CLAYFIELD COLLEGE

Please complete this application form in full and return it with the following:

- Cover Letter Personal Résumé Two most recent School Reports Latest NAPLAN Results

Student Details

NAME _____ AGE _____

DATE OF BIRTH _____ PRESENT SCHOOL _____

PROPOSED ENTRY YEAR LEVEL _____ PROPOSED ENTRY YEAR _____

- DAY STUDENT BOARDING STUDENT

Parent/Guardian 1 Information

Parent/Guardian 2 Information

SURNAME _____ SURNAME _____

FIRST NAME _____ FIRST NAME _____

RESIDENTIAL ADDRESS _____ RESIDENTIAL ADDRESS _____

STATE _____ POSTCODE _____ STATE _____ POSTCODE _____

POSTAL/BILLING ADDRESS (same as above) _____ POSTAL/BILLING ADDRESS (same as above) _____

STATE _____ POSTCODE _____ STATE _____ POSTCODE _____

HOME PHONE _____ HOME PHONE _____

WORK NUMBER _____ WORK NUMBER _____

MOBILE _____ MOBILE _____

EMAIL _____ EMAIL _____

OCCUPATION _____ OCCUPATION _____

EMPLOYER _____ EMPLOYER _____

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CLAYFIELD COLLEGE

Details of any family association with Clayfield College

NAME

YEAR OF ATTENDANCE

RELATIONSHIP

HOUSE AT CLAYFIELD COLLEGE

Signature of Parent/s of Guardian/s

DATE

DATE