

ICPA Bursary 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
 Reference from Principal

Student Details

NAME _____ AGE _____

DATE OF BIRTH _____ PRESENT SCHOOL _____

PROPOSED ENTRY YEAR LEVEL _____ PROPOSED ENTRY YEAR _____

- DAY STUDENT BOARDING STUDENT

Parent/Guardian 1 Information

SURNAME _____

FIRST NAME _____

RESIDENTIAL ADDRESS _____

STATE _____ POSTCODE _____

POSTAL/BILLING ADDRESS (same as above) _____

STATE _____ POSTCODE _____

HOME PHONE _____

WORK NUMBER _____

MOBILE _____

EMAIL _____

OCCUPATION _____

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 _____