



Applications Close Monday 3 June 2019

Please scan and email your application form, 500 word personal response, copy of your most recent semester report and recent photograph of yourself to foundation@somerville.qld.edu.au

Applicant and Family Information

Full Name: DOB: / /

Postal Address:

Home Phone: Mobile:

Email:

Years attended at Somerville House:

Special connection to the School:

Father's/Guardian's Full Name:

Home Phone: Work: Mobile:

Email:

Mother's/Guardian's Full Name:

Home Phone: Work: Mobile:

Email:

Names and birth dates of siblings:

Brother: DOB: / / Brother: DOB: / /

Sister: DOB: / / Sister: DOB: / /

Please detail any family circumstances of which the Selection Panel should be aware:

.....

Emergency Contact

If your parent/guardian cannot be reached, please nominate someone else whom we can contact:

Full Name: Relationship:

Home Phone: Work: Mobile:

Email:

Overseas Exchange Program

Has your family hosted an overseas exchange student?

Yes

No

If yes, from which country and when:

.....

.....

Have members of your family participated in an overseas exchange program?

Yes

No

If yes, to which country and when:

.....

.....

Do you have close friends or relatives living abroad?

Yes

No

If so, please specify the state/province and country:

.....

.....

Placement Information

Have you applied to participate in an eligible* overseas study experience in 2020? Yes

No

* Please refer to the eligible activities detailed on the Foundation page on *My Somerville*.

If yes, please provide relevant details (country, institution, course/program, project, duration):

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Have you been accepted to participate in this 2020 overseas experience?

Yes

No

If you have not made any formal arrangements, please provide relevant details (country, institution, course/program, project, duration) of the overseas study experience you wish to participate in should you receive the scholarship:

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What is your religious affiliation, if any?

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How often do you participate in structured religious services?

Weekly

Monthly

Occasionally

Never

As your host family may have a different religious affiliation, how strongly do you feel about having access to structured religious services of your own faith?

Require access

Not necessary

Do you have any medical conditions?

Yes

No

If yes, please explain, including details of any medication taken:

.....

.....

Can you live in a household with pets?

Pet indoors:

Yes

No

Pet outdoors:

Yes

No

If no to either, please identify the animal(s) and explain:

.....

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Identify your major interests and activities and indicate how often you pursue them:

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.....
.....
.....
.....

Language proficiency (for languages other than your native language):

Language: Years studied: Basic Intermediate Advanced

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Application Criteria

Please prepare a brief response (500 words), detailing why you are the best candidate for the scholarship, specifically addressing the following:

- What you are like, ie. your personality, your sense of humour, are you patient or easily frustrated, your relationships with others, things that are important to you
- Provide examples of previous activities that demonstrate your capacity to undertake an overseas study experience and how it will contribute to your future
- Your most important activities, interests and plans for the future
- What you believe epitomises the all-round qualities and values typical of the Somerville House tradition
- How you will contribute to the School and broader community your return.

Conditions of Application

While the Somerville House Foundation is delighted to be able to offer this Overseas Study Scholarship, students and parents should make their own enquiries and satisfy themselves as to the suitability of a particular overseas experience. The role of the Somerville House Foundation in offering this scholarship is to provide financial assistance for the student to participate in an eligible overseas study experience of the student’s choice.

The Foundation has no further role or responsibility in the control or conduct of that program.

Parent/Guardian Name:

Signature: Date: / /

Applicant Name:

Signature: Date: / /

Privacy Statement

The collection of this personal information is only for use in processing this application.