



Application Form

Full Name of Student:

Name of Parent/Guardian:

Address:

Suburb:

Post Code:

Home phone:

Work:

Mobile:

Email address:

Name of Scholarship Applied For:

Current Primary School:

Grade 6 Teacher and Contact Number:

Student Achievements Relating to Scholarship:

Please list any information which will help us assess your student for the scholarship.

The Grade 6 teacher may be contacted for further information, and a student interview may be required later in the year.

Please send this completed form to:

Mrs Christine Dickson
Warrnambool College
P O Box 442
Warrnambool Vic 3280