

GIRRAWHEEN SENIOR HIGH SCHOOL **SCHOLARSHIP APPLICATION FORM**











SCHOLARSHIP IN **PERFORMING ARTS**

STUDENT DETAILS

First Name:	
Surname:	
Year when beginning Year 7:	DOB:
Primary School:	Gender: Male Female X
Residential Address:	
Suburb:	Postcode:
Mobile Number:	
Email:	
PARENT DETAILS	
First Name:	
Surname:	
Residential Address (if different to above):	
Suburb:	Postcode:
Mobile Number:	Home:
Email:	
PLEASE BRIEFLY DESCRIBE YOUR STRENGTHS IN RELATION TO PERFORMING ARTS:	
PLEASE ATTACH A COPY OF: Your most recent Report	Year 5 NAPLAN Results
PLEASE PROVIDE A STATEMENT OF SUPPORT FROM YOUR TEACHER/PRINCIPAL:	
Teacher/Principal Signature:	Date: