

GIRRAWHEEN SENIOR HIGH SCHOOL SCHOLARSHIP APPLICATION FORM





STUDENT DETAILS

DOB:
Gender: Male Female X
Postcode:

PARENT DETAILS

First Name:		
Surname:		
Residential Address (if different to above):		
Suburb:	Postcode:	
Mobile Number:	Home:	
Email:		

PLEASE PROVIDE A BRIEF OUTLINE OF YOUR INTEREST IN STEM INCLUDING ANY STEM GOALS:

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:

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