



## APPLICATION FORM FOR ENDEAVOUR SCHOLARSHIP - YEAR 7, 2020

FAMILY NAME:		Given names:	
	(please print)		(please underline name usually used)
Address:			
Home telephone:		Email:	
Present school:			
Date of birth:		Country of birth:	
		<u> </u>	
NAME OF FATHER:			
Tiome address (ii dine	erent nom above)		
· ·			
Occupation:		Business name and addr	ess:
Mobile phone and/or	Business telephone:		
Email:			
NAME OF MOTHER:			
Home address (if diffe	erent from above)		
Occupation:		Business name and add	ress:
Mobile phone and/or	Business telephone:		
Email:			
Has the candidate an	y connection with King	g's School?	
To what Church does			
	-	ents (use separate sheet if	
Camio approants in	e. este and domoverno	one departure officer	

Ethnicit) (P		i.e. Tongan,	Samoan, Maori. If Maori, please state your lwi)	
Please li	st two referees who will support your son's ap	oplication:		
	Referee 1		Referee 2	
Name:		-		
Address	:	-		
		-		
Occupat	ion	-		
and wha	didate should submit a one-page (typed is pre t he would contribute to the School.  TICK EACH BOX TO INDICATE COMPLETION):	eferred) state	ment about why he wishes to attend King's School	
	Completed Application Form			
_	Copy of candidate's last School Report			
	A recent passport sized photograph			
	Candidate's personal statement			
	Copy of Birth Certificate and/or documentary evidence of New Zealand citizenship or residency			
	Take Confidential Report and self-addresse	ed envelope	to candidate's school	
Sign	ATURE OF PARENT:		Date:	
			ealand Citizens and Residents of e active in their culture.	
	(PLEASE MAKE SURE TO ATTA	ACH <b>COPIES</b>	ONLY OF ANY DOCUMENTATION)	

Please return to: Admissions Manager – Amyliz Lonsdale

**ENDEAVOUR SCHOLARSHIP TESTING: 14 MAY 2018** 

**APPLICATIONS CLOSE: 10 MAY 2018** 

King's School Private Bag 28914 AUCKLAND 1541

Email: a.lonsdale@kings.school.nz

Or Deliver to: King's School, 258 Remuera Road, AUCKLAND 1050