



KING'S
SCHOOL

**ACADEMIC ENTRANCE SCHOLARSHIP
FOR YEAR 7, 2019**

APPLICATION FORM

NAME OF BOY _____
(Surname) *(First Names)*

DATE OF BIRTH: _____ Age at 1st January 2018: _____
Years *Months*

CURRENT SCHOOL: _____

PRINT PARENTS' FULL NAMES: _____

OCCUPATION / EMPLOYER(S): _____

HOME ADDRESS: _____

TELEPHONE: Home: _____ Work: _____

Email: _____ Mobile Ph: _____

(PLEASE ENCLOSE A COPY OF YOUR SON'S LATEST SCHOOL REPORT)

APPLICATIONS CLOSE: 23 February 2018
ENTRANCE TESTING: 27 February 2018

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