

MUSIC SCHOLARSHIP YEAR 7, 2021 - APPLICATION FORM

NAME OF BOY:				
(Surname)		(First Name/s – Please underline name he is I		name he is known as)
DATE OF BIRTH:		Age at 1 st January 2020		
			Years	Months
CURRENT SCHOOL:				
PRINT PARENT'S FULL NAMES	S:			
OCCUPATION / EMPLOYER:				
HOME ADDRESS:				
TELEPHONE:				
Home:	Work:		Mobile:	
EMAIL:				
INSTRUMENT(S) PLAYED:	(1)		GRADE	
	(2)		GRADE	

APPLICATIONS CLOSE: Thursday 7 May 2020 ENTRANCE TESTING: Monday 11 May 2020

Please enclose a **copy** of your son's latest school report, and send your completed form to:

Admissions Coordinator, King's School, Private Bag 28914, AUCKLAND 1541

Email: admissions@kings.school.nz Phone: (09) 520 7784