

## BUCHANAN CHARITABLE TRUST SCHOLARSHIP Application Form for Entry in Year 5, 2025

Applications are open to all boys entering Year 5 in 2026, who would not otherwise be able to attend King's School. This Scholarship is tenable for years 5 – 8 at King's School, followed by years 9 – 13 at King's College; covering tuition & associated fees (please note King's College Boarding Fees are not included in this scholarship).

## Applications close Wednesday 7 May 2025

Assessments held Tuesday 20 May 2025, 9am - 11.30am

Applicant			
Family Name:	Given Names:		
Date of Birth:	Nationality:		
Ethnicity:			
If NZ Maori, please State Iwi:			
Religious Denomination:	_ Church applicant belongs to:		
Home Address:			
Suburb:	Post Code:		
Current School:			
Please list any connections applicant has with King's	s School (e.g. a family member who is a current or previous student)		
Name:	Years Attended: Connection:		
Name:	Years Attended: Connection:		
Parents / Guardians			
Dr / Mr / Mrs / Ms / Miss (circle as appropriate)	Dr / Mr / Mrs / Ms / Miss (circle as appropriate)		
Relationship to Child:	Relationship to Child:		
Surname:	Surname:		
Given Name:	Given Name:		
Home address (if different from above):	Home address (if different from above):		
Home Phone:	Home Phone:		
Mobile Phone:	Mobile Phone:		
Email:	Email:		
Occupation:	Occupation:		
Business Name:	Business Name:		
During the week, child lives with Both Pa	arents Shared Other (circle as appropriate)		
If other, please specify name and relationship _			

What do you believe your son would contribute to King's School, should he attend? (use separate sheet if necessary)

## The candidate is asked to submit a one-page statement telling us about himself, why he wishes to attend King's School and what he believes he would contribute to the School

Please list two referees who will support your son's application. (Referees could include family friends, business associates, your son's teacher or pastor - but must not be related to your son).

	Referee One		Referee Two
Name		Name	
Phone Number		Phone Number	
Address		Address	
Occupation		Occupation	
Connection to Applicant		Connection to Applicant	
Please include the following	with your son's application	(tick each box to indicate con	npletion)
Completed Application F	orm		
Applicant's personal stat	ement		
Copy of candidate's mos			
Copy of NZ Birth Certific	ate or Passport showing e	vidence of New Zealand Ci	itizenship or Residency
A recent passport-sized	photograph of applicant		
	idential Report to our curre be returned directly to King's S		oad at <u>https://kings.school.nz/scholarships/</u> ) - see address below
SIGNATURE OF Parent/Guard	lian:		Date:
SIGNATURE OF Parent/Guard	lian:		_ DATE:
Applications c	lose Wednesday 7 Ma	y 2025 Assessme	ents held Tuesday 20 May 2025
	Please Retur King's School Ad	n Completed Applicati missions Manager, Emm e.macedra@kings.school	ion To: na Macedra

**Or via mail**: Admissions Manager, King's School, Private Bag 28914 Auckland If you are posting a completed application to King's School, please allow sufficient time for your application to arrive before the closing date. Make sure to attach **COPIES** of any documentation. We cannot accept responsibility for originals.