



BUCHANAN CHARITABLE TRUST SCHOLARSHIP

Application Form for Entry in Year 5, 2027

Applications Close: Thursday 30 April 2026, 5.00pm

Scholarship Testing: Morning of Tuesday 12 May 2026

Applications are open to all boys entering Year 5 in 2027, who display academic potential and strong all-round ability.

Scholarship is tenable for Years 5 – 8 at King's School, followed by Years 9 – 13 at King's College.

This is a financial aide scholarship that includes tuition, uniform, and other associated school expenses.

Applicant Information

Surname: _____ First Names: _____ Known As: _____

Date of Birth: _____ Nationality: _____ Ethnicity: _____

If NZ Māori, state Iwi: _____

Religion & Church Attended: _____

Home Address (Street Address): _____

Suburb: _____ Postcode: _____

Current School: _____

Please list any connections applicant has with King's School (*eg a family member who is a current or previous student*)

Connection: _____ Name: _____ Years Attended: _____

Connection: _____ Name: _____ Years Attended: _____

Does applicant currently receive any support for the following

(this information will not prejudice the application, but is required to ensure support is in place if required)

Diagnosed/Indicators of a Specific Learning Need (eg Dyslexia, Autism, ADHD)

Accelerant Work

Small Group Learning Support

Behavioural Support

Speech Language Therapy

Occupational Therapy

Other

If yes to any of the above, please provide further information: _____



Caregiver 1 Information

Relationship to applicant: _____ Title: Dr Mr Mrs Ms Miss

Surname: _____ First Names: _____ Known As: _____

Contact Phone Number: _____ Contact Email: _____

Home Address same as applicant Yes No

If not same address as applicant: Street Address: _____

Suburb: _____ Postcode: _____

Occupation: _____ Business Name: _____

Caregiver 2 Information

Relationship to applicant: _____ Title: Dr Mr Mrs Ms Miss

Surname: _____ First Names: _____ Known As: _____

Contact Phone Number: _____ Contact Email: _____

Home Address same as applicant Yes No

If not same address as applicant: Street Address: _____

Suburb: _____ Postcode: _____

Occupation: _____ Business Name: _____

Applicant Lives With *(please tick):*

Both Caregivers Both Caregivers, Shared Caregiver 1 Caregiver 2

If the applicant is not offered a Buchanan Charitable Trust Scholarship at King's School for Year 5 2027, would you be interested in applying for a fee-paying place (if one is available)? Yes No



Applicant's Interests and Achievements

(you may use a separate sheet if you prefer)

What do you believe the applicant would contribute to King's School?

(you may use a separate sheet for your answer if you prefer)

Applicant's Personal Statement

The applicant is required to submit a personal statement with this application. He should tell us a bit about himself, his achievements, strengths and personal goals. Applicant may hand-write or type his personal statement. No longer than one page please.

Confidential Report from applicant's teacher

Please download the Confidential Report and provide it to the applicant's current teacher. Report can be downloaded via the King's School Website: <https://kings.school.nz/scholarships/>
When completed, form to be returned directly to King's School by teacher – see addresses overleaf.

Two Referees who support this application

(Referees may include family friends, business associates, the applicant's teacher or pastor – but must NOT be related to applicant)

Referee One

Connection to Applicant: _____ Full Name: _____
Contact Phone Number: _____ Contact Email: _____
Occupation: _____ Business Name: _____

Referee Two

Connection to Applicant: _____ Full Name: _____
Contact Phone Number: _____ Contact Email: _____
Occupation: _____ Business Name: _____



Please include the following with this application *(tick box to indicate completion):*

Completed Application Form

Applicant's list of Interests and Achievements

Answer to question "What Do You Believe Applicant Would Contribute"

Applicant's Personal Statement

Applicant's 2025 end-of-year School Report

Educational Psychologist Assessment, if applicable

Any other report/s relating to applicant's learning needs

(eg Giftedness Assessment / Speech Therapist Report / Occupational Therapist Report)

Copy of applicant's NZ Birth Certificate, or NZ Passport

If applicant is not a NZ Citizen, please include a copy of NZ Residency Permit or Domestic Student Visa

Recent photograph of applicant *(Head and Shoulders)*

We have given the Confidential School's Report to applicant's current Teacher

Declaration

I/we confirm that the above application is true and correct. I/we understand that submission of this application does not constitute an enrolment agreement with King's School. I/we understand that the successful applicant will be asked to sign an Admission Agreement as part of the Acceptance of any Scholarship offered to King's School.

Name & Signature of Caregiver 1: _____ Date: _____

Name & Signature of Caregiver 2: _____ Date: _____

Return completed Year 5 2027 Buchanan Charitable Trust Scholarship application to:

King's School Admissions Manager, Emma Macedra

e.macedra@kings.school.nz

Or mail to: Admissions Manager, King's School, Private Bag 28914, Remuera 1541.

*Note: if mailing a completed application to King's School, please allow sufficient time for the application to arrive before the closing date. Make sure to attach **COPIES** of documentation. We cannot accept responsibility for originals.*

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