



## **ENDEAVOUR SCHOLARSHIP Application Form for Entry to Year 7, 2026**

Scholarships are open to New Zealand Citizens and Residents of Maori or Pasifika descent who are active in their culture. This Scholarship is tenable for years 7 – 8 at King's School, followed by years 9 – 13 at King's College; covering all tuition and associated fees (please note King's College Boarding Fees are not included in this scholarship).

Applications Close: Wednesday 7 May 2025 Testing Will Be Held: Tuesday 13 May 2025

## **Applicant**

Family Name:(please print)	Given Names:(please underline name your son is known by)			
	Nationality:			
Ethnicity:				
If NZ Maori, please state lwi:				
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:	Home address (if different from above):			
Home address (if different from above):				
Home Phone:				
Mobile Phone:	Mobile Phone:			
Email:	Occupation:			
Occupation:				
Business Name:				
During the week, child lives with Both Par	rents Shared Other (circle as appropriate)			
If other, please specify name and relationship				

	ase outline your s	on a interests and achievements (use	separate sheet ii necet	3541 y j			
Wh	nat do you believe	your son would contribute to King's So	chool, should he attend	? (use separate sheet if necessary)			
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Th	o candidato is as	kad ta submit a ana-naga stataman	t talling us about him	self, why he wishes to attend King's School			
ın	e candidate is as	and what he believes h					
		es who will support your son's applica					
(RE	ererees coula inclua	e family friends, business associates, your s	son s teacner or pastor - b				
		Referee One		Referee Two			
Ν	lame		Name				
	da a cara Niconada a ca		Dhana Neumban				
۲	hone Number		Phone Number				
Α	.ddress		Address				
•							
			-				
C	occupation		Occupation				
	·		·				
	connection to pplicant		Connection to Applicant				
			P1				
Ple	Please include the following with your son's application (tick each box to indicate completion)						
	Completed Application Form						
	Applicant's perso						
	Copy of candidate's most recent School Report						
	Copy of NZ Birth Certificate or Passport showing evidence of New Zealand Citizenship or Residency						
	A recent passport-sized photograph of applicant						
	We have given the Confidential Report to our current school (available to download at <a href="https://kings.school.nz/scholarships/">https://kings.school.nz/scholarships/</a> ) - When completed, form to be returned directly to King's School by applicant's teacher - see address below						
Sic	SNATURE OF Paren	t/Guardian:		DATE:			
SIGNATURE OF Parent/Guardian:				DATE:			

**Applications close Wednesday 7 May 2025** Assessments held Tuesday 13 May 2025

> **Please Return Completed Application To:** King's School Admissions Manager, Emma Macedra

via email: e.macedra@kings.school.nz