

ACADEMIC SCHOLARSHIP

Application Form for Entry to Year 7, 2027

Applications Close: Wednesday 18 February 2026

Scholarship Testing: Morning of Monday 23 February 2026

Applications are open to all boys entering Year 7 in 2027, who display strength in Literacy and Mathematics. Scholarships are tenable for Years 7 and 8 at King's School and is awarded up to the value of 75% of tuition fees.

Applicant Information

Surname:	First Names:	Known As:
Date of Birth:	Nationality:	Ethnicity:
If NZ Māori, State Iwi:		
Suburb:		Postcode:
Current School:		
Please list any connections	applicant has with King's School (6	eg a family member who is a current or previous student)
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Please list any connections Connection: Connection: Does applicant currently reconstruction will not prejudent currently reconstruction will not prejudent.	applicant has with King's School (e	Years Attended: Years Attended: Years Attended: Years Attended: Output Dyslexia, Autism, ADHD) Learning Support
Please list any connections Connection: Connection: Does applicant currently receive (this information will not prejudicated)	Name: Name: Name: Name: Serive any support for the following adice the application, but is required to small Group of the Speech Language.	Years Attended: Years Attended: Years Attended: Years Attended: Dyslexia, Autism, ADHD) Learning Support



Caregiver 1 Information

Relationship to applicant:			Mr	Mrs	Ms	Miss
Surname: First Names:			Knov	vn As:		
Contact Phone Number: Co		ntact Email:				
Yes	No					
Street Addre	ess:					
Suburb:				Postco	ode:	
Occupation:		Business Name:				
	_ Title:	Dr	Mr	Mrs	Ms	Miss
Surname: First Names:			Knov	vn As:		
Contact Phone Number: Cont						
Yes	No					
Street Addre	ess:					
Suburb:				Postco	ode:	
	Business N	lame:				
vers, Shared	Ca	regiver 1		Careg	iver 2	
			27,	Vac		No
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Please include the following with this application (tick box to indicate completion):

Completed Application Form

Applicant's 2025 end-of-year School Report

Educational Psychologist Assessment, if applicable

Any other report/s relating to applicants 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 applicant's NZ Residency or Domestic Student Visa

Recent photograph of applicant (head and shoulders)

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/s will be asked to sign an Admission Agreement as part of the Acceptance of any Scholarship offered by King's School.

Name & Signature of Caregiver 1:	_ Date:		
Name & Signature of Caregiver 2:	Date:		

Return completed Year 7 2027 King's School Academic Scholarship application to:

King's School Admissions Manager, Emma Macedra <u>e.macedra@kings.school.nz</u>

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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