

The Gidleigh SCHOLARSHIP

Gidleigh Scholarship Application Form

Applicant's given name _____

Applicant's preferred name _____

Applicant's family name _____

Date of birth _____ Gender _____

Current school _____

Current year level _____ Year level at school in 2020 _____

Is the applicant an Australian citizen or permanent resident? Yes No

Has the applicant previously applied for a St Michael's scholarship? Yes No

Parent/guardian 1's name _____

Parent guardian 1's address _____

Do you live at the same address as the applicant? Yes No

Parent/guardian 1's email _____

Parent/guardian 1's phone _____

Parent/guardian 1's occupation _____

Parent/guardian 2's name _____

Parent guardian 2's address _____

Do you live at the same address as the applicant? Yes No

Parent/guardian 2's email _____

Parent/guardian 2's phone _____

Parent/guardian 2's occupation _____

Please indicate you have read and understood the St Michael's selection criteria, and terms and conditions Yes No

Please submit completed application by email to scholarships@stmichaels.vic.edu.au.

No payment is required with this application.

An email will be sent requesting the required supporting documents and financial details.

Please contact the Student Recruitment Team on +61 3 8530 3310 or email if you have any further questions.

Co-educational | K-12 | St Kilda

25 Chapel Street, St Kilda, Victoria 3182 Australia

Telephone +61 3 8530 3200 Facsimile +61 3 9510 9392 www.stmichaels.vic.edu.au

