Scholarship Application FormNumberF-2002Version0521Approved10/06/2021

Scholarship Application Form

International Student

Please print clearly in English and in BLOCK letters. Please tick boxes where appropriate.

Part of The Anglicon Schools Commission (Inc.)

STUDENT DE	TAILS			
Family name:		Given names:		
Title:	Date of birth: (dd/mm/yyyy)	Age:	Gender: Male 🗆 Female: 🗆 Not Specified:	
Email:				
SCHOLARSHIP				
Please tick the scholarship that is being applied for:				
The ASC Award for outstanding academics				
Selection Criteria:				
1.	The last two academic reports			
2.	A 250-word summary of how the student has demonstrated a positive approach to school life			
	and their learning journey to date			
New Student Scholarship for excellence in a chosen field				
Selection Criteria:				
1.	The last two academic reports			
2.	A 250-word summary of how the student has demonstrated outstanding success in their chosen			
field/talent and a positive approach to school life and their learning journey to date				
SELECTION CRITERIA (Please address the selection criteria in this section)				

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DECLARATION				
I certify that the information provided by me on this application form and the attachments is true, complete and				
correct in every particular.				
By signing this application form, I fully understand the conditions under which the scholarship is offered, and if				
offered a scholarship I agree to:				
1.	Maintain all conditions applicable to my student visa			
2.	Abide by all ASC International and school policies and procedures, including the refund and withdrawal policy.			
3.	Maintain a positive and supportive attitude towards ASC International and the school community			
4.	Allow any photos of me in relation to the scholarship to be used in ASC International and school publications and promotions			
Student Full Name:				
Student Signature:		Date:		
Parent/Guardian Full Name:				
Parent/Guardian Signature:		Date:		
		bute.		
OFFICE USE ONLY				
Approved by Principal:		Name		
Sign		Date		
Approved by ASC International Director		Name		
Sign		Date		
□ Accounts advised Date:		□ Student records advised Date:		