Scholarship application Music Scholarship



I/We wish for my son/daughter to apply for a Music Student's full name Scholarship at King's College. I/We agree to providing confidential financial information where necessary. Please save the completed form and email to scholarships@kingscollege.school.nz Student Information Current school Instruments and grade Family information LEGAL GUARDIAN/PARENT 1 Name Home address Postal address Home phone Mobile Work phone **Email address** Signature Date **LEGAL GUARDIAN/PARENT 2** Name Home address Postal address Home phone Mobile

Date

Work phone

Email address

Signature