

Scholarship application

KCOCA Gibbons Award



I/We wish for my son/daughter *Student's full name* to apply for the KCOCA
Gibbons Award 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

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

Work phone

Email address

Signature

Date