Scholarship application Sports Scholarship



I/We wish for my son/daughter to apply for a Sports 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 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

Date

Email address

Signature