

Scholarship application

Stride Scholarship



I/We wish for my son *Student's full name* to apply for the Stride 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

Email address

Signature

Date