

ROTARY CLUB OF VICTOR HARBOR DR FRED HEDDLE SCHOLARSHIP APPLICATION FORM

All Information disclosed in this application will be treated confidentially. **Please complete this form in your own handwriting. "Closing Date Friday 11th January 2019"**

THE APPLICANT:

Full name: _____

Date of Birth: _____

Postal address: _____

Residential address (if different): _____

Telephone: _____

Mobile: _____

Email: _____

Explain your connection to the area of City of Victor Harbor, District Council of Yankalilla or Alexandrina Council.

In the year commencing 1st January 2019 which course of education at a recognised educational institution do you intend to enroll in:-

Course: _____ Institution: _____

Term to completion: _____ years

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REFEREES:

Referees should have knowledge of the applicant's home situation, character, academic motivation and ambitions. Please attach a letter of referral from each referee.

First referee:

Name: _____

Address: _____

Relationship: _____

Phone: _____

Email: _____

2nd referee:

Name: _____

Address: _____

Relationship: _____

Phone: _____

Email: _____

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DECLARATION:

The information I have provided in this application is true and correct.

If I am awarded this scholarship I accept the conditions outlined by the Rotary Club of Victor Harbor Dr Fred Heddle Scholarship Brochure.

I am aware that my school, tertiary institution, sporting or other associations where I am a member may be contacted by the assessors of this scholarship to enquire about my suitability.

I consent to assessors communicating with my parents/guardians.

Father/Guardian Name: _____

Address: _____

Phone: _____

Email: _____

Mother/Guardian Name: _____

Address: _____

Phone: _____

Email: _____

Applicant's Signature: _____

Date: _____

Signature of Parent/Guardian _____

Date: _____

This application may be emailed to victor.rotary@gmail.com

Or posted to The Secretary, Rotary Club of Victor Harbor, PO Box 213 Victor Harbor SA 5211

