

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 30th September 2019

THE APPLICANT:

Full name: _____

Date of Birth: _____

Postal address: _____

Residential address (if different): _____

Telephone: _____

Mobile: _____

Email: _____

What is your connection to the Victor Harbor area?

In the year commencing 1st January 2020 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 consent to assessors communicating with my parents/guardians.

Father/GuardianName:

Address:

Phone:

Email:

Mother/GuardianName:

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