

60th Anniversary Excellence Scholarship

St David's College 60th Anniversary Excellence Scholarship Application Form

1. Applicant Inform	nation
Full Name:	
Date of Birth:	
Current School:	
Year Group Applyi	ng For: □ Year 9 □ Year 10 □ Year 11 □ Year 12 □ Year 13
Nationality:	
First Language:	
Gender:	
Home Address:	
Parent/Guardian E	mail:
Parent/Guardian P	hone Number:
2. Scholarship Cat	egory
Please select one s applicable):	cholarship category (a second may be added as secondary preference if
☐ Academic excelle	
☐ Sport and athletic	
☐ Music and perform☐ Art and design	ming arts
☐ Leadership in out	door education
☐ Community leade	
☐ Overcoming barri	ers to learning
If applying under tw	o categories, please indicate primary and secondary preferences:
Driman/	Socondan

3. Personal Statement (To be completed by the applicant)	
In no more than 500 words, explain why you are applying for this scholarship and how you demonstrate excellence in the selected category. Highlight any achievements, challenges overcome, or goals for the future.	
4. Supporting Evidence (optional but encouraged)	
Please attach any of the following, where relevant:	
Certificates or awards	
Samples of work (portfolio, artwork, recordings, etc.)	
Reference letters or commendations	
Links to videos (e.g. for performance or sport)	
List attachments provided:	

5. Teacher / Coach Reference
Name of Referee:
Position/Role:
School/Institution:
Email Address:
Please ensure this referee is aware they may be contacted as part of the selection process.
6. Registration Requirement
Please confirm:
\Box I have submitted a completed $\bf St$ $\bf David's$ $\bf College$ $\bf Registration$ Form alongside this application.
Only candidates who submit both this form and a registration form will be considered.
\Box I have submitted a recent school report for the applicant and evidence of achievements and abilities relating to the scholarship category under which they are applying.
$\hfill\Box$ I have submitted a copy of the applicant's passport (or another acceptable form of identification)
7. Parental/Guardian Declaration
I/we support this application for the 60th Anniversary Excellence Scholarship and understand that scholarship awards are conditional upon the school's selection process and terms and conditions.
Parent/Guardian Name:
Signature:
Date:
8. Student Declaration
I confirm that the information provided in this application is accurate and complete. I understand the scholarship process and agree to adhere to all requirements and deadlines.
Applicant Name:
Signature:
Date: