

Academic Scholarship Application Form

STUDENTS ARE REQUIRED TO COMPLETE THE FOLLOWING IN THEIR OWN HANDWRITING.

| Student Details: | | | |
|---|-------------------------|--|--|
| Student Full Name: | | Student Date of Birth: | |
| Current School: | | Year Level in 2026: | |
| Address: | | | |
| Suburb: | | | |
| Tell us about yourself: | | | |
| What is your favourite subject and | I why? | | |
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| Why is an Academic Scholarship at | t Fahan School importan | t to you? | |
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| | | | |
| How would you contribute to the I Scholarship recipient? | Fahan School Communit | y and embody its values as an Academic | |
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PARENT / GUARDIAN 1:

Academic Scholarship Application Form

PARENTS ARE REQUIRED TO COMPLETE THE FOLLOWING.

All contact details and signatures of both parents must be provided. Both parents will receive communication regarding the Scholarship.

| Full Name: | Relationship to Student: | |
|----------------------|--------------------------|--|
| Email: | Mobile: | |
| Address: | | |
| Suburb: | | |
| Signature: | | |
| PARENT / GUARDIAN 2: | | |
| Full Name: | Relationship to Student: | |
| Email: | Mobile: | |
| Address: | | |
| Suburb: | | |
| Signature: | | |

Please return this form, together with the student's two most recent school reports and NAPLAN results, to the Scholarship Evaluation Team, via email at scholarships@fahan.tas.edu.au or post to:

Fahan School Scholarship Evaluation Team PO Box 2090 Lower Sandy Bay TAS 7005

ALL DOCUMENTATION MUST BE RECEIVED BY FRIDAY 14 MARCH 2025.