



ENTRANCE BURSARY APPLICATION for students entering YEARS 7, 8, 9, 10 or 11 Special Ability Bursaries

This information is **confidential**.

Please mail your application and relevant documentation to:
The Director of Enrolments
Toowoomba Grammar School, PO Box 2900
Toowoomba Qld 4350

Applicant's Details

Surname: _____ Given names: _____

Date of birth: _____ Entering Year: 7 8 9 10 11 (please circle one) in 20____

Present school: _____ Present year level: _____

If you attend TGS will you be a Boarder or Dayboy (please tick)

Australian Citizenship Status: Australian or _____

Parents/Guardians name/s: _____

Home/Postal address: _____

Home phone number: _____ Email address: _____

Any other contact details? e.g. fax, mobile _____

Please tick which type of Bursary is being applied for:

- | | | | | |
|--------------------------------|------------------------------------|-----------------------------------|--------------------------------|-----------------------------------|
| <input type="checkbox"/> Art | <input type="checkbox"/> Athletics | <input type="checkbox"/> Cricket | <input type="checkbox"/> Drama | <input type="checkbox"/> Football |
| <input type="checkbox"/> Music | <input type="checkbox"/> Rugby | <input type="checkbox"/> Swimming | Other..... | |

Please note the following requirements for this application:

- Please complete this form.
- Parents to attach a curriculum vitae, addressed to the Director of Enrolments, outlining their son's achievements and abilities.
- Please attach photocopies of references from coaches, certificates, awards etc.
Copies only please, as they cannot be returned.
- Attach a photocopy of the applicant's latest school report and Year 5 NAPLAN results to this application if not already supplied to the Enrolments Office.

PLEASE NOTE: An application for a Special Ability Bursary does not hold a place for your son/s. You will need to arrange an interview directly with the Enrolments Office.

Signature of Parent/Guardian: _____ Date: _____