Please complete this form and return to the Registrar: The Kingsley School, Beauchamp Avenue, Leamington Spa, Warwickshire CV32 5RD E: admissions@kingsleyschool.co.uk T: 01926 421368

## Scholarship Application Form

Please ensure that this form is completed by your child.  Child's Name					
					Child's Address
Child's Current School				ESSE QUAM VIDER	
Cabalarahin annhiina fari				KINGSLEY	
Scholarship applying for:  Year 7 Art  Year 7	ear 7 Drama	Year 7 Music		KINGSLEY	
fear / Art fe	ear / Drama	fear / Music	Year 7 Sport		
Sixth Form Art	xth Form Drama	Sixth Form Fashio	n & Textiles		
Sixth Form Music	n Music Sixth Form Sport Sixth Form Photography		graphy		
Please tell us a little about yourself and why you are applying for this scholarship:					
Diagon tell up about any oak		ition valeted to very e			
Please tell us about ally sci	1001-Dasea activ	illes related to your s	cholarship and which y	ou have been involved with:	

Please tell us about activities outside of your school related to your scholarship that you have been involved with, including any awards:					
Do you have any other hobbies or interests you would like to tell us about?					
Applicant's signature					
Parent's signature					
Date					