## KEEBRA PARK



## **Scholarship Application**

Keebra Park State High School offers Full or Part Scholarships

- FULL Scholarship is the amount of the Student Resources Scheme
- **PART** scholarship is a percentage of the Student Resource Scheme which will be deemed appropriate by Keebra Park State High School.

Please complete <u>ALL</u> parts of this form. Information <u>MUST</u> be fully completed for it to be considered a valid								
application. Incomplete application forms will not be processed.								
The Principal, Keebra Park State High School, PO Box 40, SOUTHPORT QLD 4215 If you have any questions please contact 07 55092555 or email <u>kpscholarship@keebraparkshs.eq.edu.au</u>								
Scholarship Request (please number in order of preference with 1 being first choice)	Academic Excellence	Rugby Le Academ				Academy	Basketball Academy	
STUDENT DETAILS								
Family Name				Date of Birth			/ /	
Given Names				Gender			□ Male □ Female	
Current School				Current Year Level				
PARENT/GUARDIAN 1 PARI			PARE	RENT/GUARDIAN 2				
Relationship	Relat		Relati	ionship				
Title (Mr/Ms/Dr)	Title		Title (	(Mr/Ms/Dr)				
Family Name	Fami		Family	ily Name				
Given Name	Give		Given	en Name				
			ONLY COMPLETE BEL		E BELOW	' IF DIFF	ERENT FR	ROM PARENT 1
Home Phone			Home Phone					
Work Phone			Work	Phone				
Mobile			Mobile					
Email (Mandatory)			Email					
Home Address			Home Address					
Student lives at this address	□ YES □ NO		Student lives at this address		his 🛛	YES	□ NO	



T 07 5509 2555 | F 07 5591 7256 | info@keebraparkshs.eq.edu.au Anne St, Southport QLD 4215 | PO Box 40 Southport | keebraparkshs.eq.edu.au

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EDUCATIONAL BACKGROUND							
Please list all schools attended by your child							
School Year	School		Location				
Year							
Year							
Sporting Achievements							
Please list significan	nt sporting achievemen	t					
Sport	rt Achievement/Representative Year		Year				
Rugby League	ague South Coast 202		2020				
STUDENT ASPIRATIO	STUDENT ASPIRATION						
What educational and sporting goals do you have?							
I declare that the information submitted in this Application for a Scholarship for Keebra Park State High School is complete and correct. I understand that the submission of incorrect or misleading information may result in the termination of the application.							
Student Name:							

Students Signature:	Date:	/	/		
Primary Parent/Guardian Name:					
Signature:	Date:	/	/		
SUBMISSION CHECKLIST					
Have you included:					
A current and active email address					
Two recent school reports and NAPLAN					
Please submit or email your application to					
KEEBRA PARK HIGH SCHOOL ADMINISTRATION OFFICE - <u>kpscholarship@keebraparkshs.eq.edu.au</u>					
ANNE STREET, SOUTHPORT by the DUE DATE					