



The Convent
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2010 SCHOLARSHIP APPLICATION FORM

Please complete all details below and return to the above address by Monday 12th October, 2009.

NAME OF APPLICANT: _____

ADDRESS: _____

TELEPHONE: _____ DATE OF BIRTH: _____

PARENT/GUARDIAN: _____

INSTRUMENT TO BE AUDITIONED: _____

TEACHER: _____

SCHOOL AND SCHOOL YEAR: _____

HOW LONG HAS THE STUDENT BEEN LEARNING? _____

I have read and understand the UHCM Scholarship Rules and Conditions and agree to abide by these.

Signature of parent
(If student is under 18 yrs)

Date: _____

Signature of student
(18yrs and over)

Date: _____