



For Office Use Only

Name

Year Group

Receipt No

YEAR 7 SCHOLARSHIP APPLICATION FORM

Candidate's Details

Candidate's Surname _____

Candidate's Forenames _____
(underline name normally used)

Candidate's Date of Birth _____

Parents' Details

Parents' Surname _____

Parents' Forenames _____

Address _____

Postcode _____

Telephone Number(s) _____

Parents' Email Addresses _____

Current School Details

Name of School _____

Name of Head Teacher _____

School Address _____

Telephone Number _____

School Email Address _____

Full details of scholarships including examination dates and application closing dates are available on our website:

<https://www.ampleforth.org.uk/college/admissions/admissions-procedures/academic-awards-scholarships>

or from the Admissions Department:

Telephone: 01439 766863.

Email: admissions@ampleforth.org.uk

Special Educational Needs

Please indicate below if the candidate has special educational needs and requires either extra time or the use of a laptop. Please include the relevant supporting documentation.

Special Educational Needs	<input type="text"/>
Extra Time	<input type="text"/>
Laptop Required	<input type="text"/>
Supporting Documentation Attached	<input type="text"/>

Bursary Assistance

In cases of financial need, a bursary may be granted subject to completion of a statement of parental income.

Bursary awards may be subject to periodic review. Please indicate below if it is your intention to apply for bursary assistance. If so, please contact the Senior Admissions Registrar for a bursary form

Telephone: 01439 766863 or Email: admissions@ampleforth.org.uk

Bursary Applicant

I confirm that I have read the Scholarships and Bursaries information available on the website.

<https://www.ampleforth.org.uk/college/admissions/admissions-procedures/academic-awards-scholarships>

Reference

I hereby give permission for Ampleforth College to request an academic and character reference from my son/daughter's current school.

Signed (Parent/Guardian) _____ **Date** _____

All scholarship applications also require the support of the student's current Headteacher. Please indicate this support by obtaining the appropriate signature below.

Signature (Headteacher) _____ **Date** _____

Please return this form together with the application fee of £50 per scholarship to:

The Senior Admissions Registrar,
Ampleforth College
York
YO62 4ER

(Please make cheques payable to St Laurence Education Trust or contact the Admissions Department for other methods of payment.)