For office use only	
Name	
Year Group	
Receipt No	



# Year 12 Scholarship Application Form

Candida	te's I	<b>Details</b>	

Candidate's Details	
Surname of Child:	
First Names (underline name normally used):	
Date of Birth:	
Parents' Details	
Parents' Surname(s):	
Parents' Forenames:	
Home Address:	
Telephone Number(s):	
Parents' Email Addresses:	

## **Current School Details**

Name of School:	
Name of Head:	
School Address:	
Telephone Number:	
Email Address:	

Full details of scholarships, including examination dates and application closing dates can be found on the Scholarships page under Admissions on our website or by contacting the Admissions department.

## 16+ Senior Scholarship

Please indicate the awards applied for (maximum of two):

Academic	Yes	No	
Art	Yes	No	
Dance	Yes	No	
Design & Technology	Yes	No	
Drama	Yes	No	
Sport	Yes	No	
Music Please also complete additional music form.	Yes	No	

## Special Educational Needs and Dietary Requirements

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

Special Educational Needs	Yes	No
Extra Time	Yes	No
Laptop Required	Yes	No
Supporting Documentation attached	Yes	No
Special Dietary requirements	Yes	No
Please provide any other relevant information:		

## **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 Registrar for a bursary form by emailing <a href="mailto:admissions@ampleforth.org.uk">admissions@ampleforth.org.uk</a> or calling 01439 766000.

Bursary Applicant	Yes		No	
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I confirm that I have read the Scholarships and Bursaries information available on our website.

## Reference

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

Signed:	
Date:	

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

The Registrar Ampleforth College York YO62 4ER

Please make cheques payable to St Laurence Education Trust or see overleaf for other methods of payment.

#### AMPLEFORTH COLLEGE – PAYMENT DETAILS FOR

#### REGISTRATION, CONFIRMATION AND SCHOLARSHIP FEES

#### PARENTS USING A UK BANK ACCOUNT

Payment by Debit or Credit Card:

Please advise your card details to the Cashier (Tel: 01439 766 883).

Payment by Bank Transfer:

 Please ensure that the name of the student and a reference e.g. registration fee, confirmation fee, or scholarship fee, together with your name, are clearly shown on the transfer document.

Bank Name and Address	Account Name
Barclays Bank	St Laurence Education Trust
1-3 Parliament Street	
York	
YO1 1XD	
Sort Code	Account Number
20 - 99 - 15	03744795

#### Payment by Cheque:

• Cheques should be made payable to St Laurence Education Trust and returned to the Admissions Office, together with the registration, confirmation, or scholarship form. Please ensure that your child's name is written on the reverse of the cheque.

#### PARENTS NOT USING A UK BANK ACCOUNT

Payment by Credit Card:

• Please advise your card details to the Cashier (Tel: 01439 766 883).

Payment by Bank Transfer:

- Please ensure that the name of the student and a reference e.g. registration fee, confirmation fee, or scholarship fee, together with your name, are clearly shown on the transfer.
- By International Telegraphic Transfer, drawn in sterling, with all bank charges, including those of the receiving bank, borne by the sender and credited to:

Bank Name and Address	Account Name
Barclays Bank	St Laurence Education Trust
1-3 Parliament Street	
York	
YO1 1XD	
IBAN	SWIFT/BIC
GB49 BARC 2099 1503 7447 95	BARCGB22