LESLEY MCPAUL AM MEMORIAL SCHOLARSHIP APPLICATION **APPLICANT INFORMATION** Name: Date of birth: Gender/preferred pronoun: Street Address: Town: State: Postcode: Postal Address: Email: Mobile: Phone: **ACADEMIC HISTORY** Year 9 Semester 1 Year 9 Semester 2 Year 10 Semester 1 Subject/Result (A,B,C etc) Subject/Result (A,B,C etc) Subject/Result ((A,B,C etc): **APPLICANT'S STATEMENT** $\ \square$ My statement describing what I hope to achieve by completing my Higher School Certificate is attached. (Statement is to be no longer than 500 words) PARENT/GUARDIAN CONTACT DETAILS Name of parent/guardian: Relationship: Email: Phone: Mobile: PRINCIPAL'S ENDORSEMENT I rate this applicant as: □Very Highly Commended ☐ Highly Commended □Commended □ Outstanding ☐ A Principal's Supporting Statement is attached. (*Statement is to be no longer than 500 words*). **SIGNATURES** Signature of applicant: Date: Signature of parent/guardian: Date: Signature of Principal: Date: