



# Sport Scholarship Application Form

## PERSONAL INFORMATION:

Student's Name:

Date of birth:

Home Address:

Phone Number:

Previous school attended:

Applying  
for the Academic Year:

Year Group (BISB):

## FATHER'S INFORMATION

Father's Name:

Mobile Number:

Email:

Home Address:

Employer – Company Name  
and Contact Person:

Position at the Company:

Self-employed/  
Entrepreneur – Name  
of your company/ies:

## MOTHER'S INFORMATION

Mother's Name:

Mobile Number:

Email:

Home Address:

Employer – Company Name  
and Contact Person:

Position at the Company:

Self-employed/  
Entrepreneur – Name  
of your company/ies:

## FINANCIAL INFORMATION:

How many people live  
in your household?

During the last year,  
how much was your total  
yearly household income  
(before taxes and expenses)

## SPORTING DETAILS:

Chosen Sport:

Number of years  
participating in this sport:

Current Club:

Playing Position:

If you compete in an individual sport – please complete the following

Event/Category:

Personal  
Best/Rank/Handicap:

Name of Current Coach  
(if you have more than one coach, please provide details for the one with whom you have most regular contact):

Email Address:

Contact  
Telephone Number:

Playing/Performance Level:

Please tick the appropriate boxes to show all the level(s) at which you have represented your sport.

LEVEL

TICK

Supplementary Information e.g. age group, level of team (e.g.1st XI), competitions, and in what year(s), whether in team or squad and number of times selected if appropriate.

School Team:

Club Team:

Regional Squad:

Age Group Squad:

Representation  
at regional/level:

Sporting ability (please include personal best performances, finishing, competition dates as appropriate):

Sporting achievements over the last two years (please include personal best performances, finishing positions, competition dates as appropriate and contribution to sport at Repton):

## REFERENCE:

Please provide details of one person qualified and willing to act as referees e.g. coach, sports organisation or teacher:

Name:

Name:

Position:

Position:

Telephone Number:

Telephone Number:

Email Address:

Email Address:

WARNING: PROVIDING FALSE AND/OR INCOMPLETE INFORMATION MAY JEOPARDIZE A STUDENT'S SCHOLARSHIP APPLICATION AND CAN BE CANCELLED ANYTIME DURING THE STUDENT'S STUDY AT BISB.

### DECLARATION:

WE DECLARE THAT INFORMATION ON THIS FORM IS TRUE, CORRECT AND COMPLETE. THE BISB HAS OUR PERMISSION TO VERIFY THE INFORMATION REPORTED BY OBTAINING DOCUMENTATION AS NEEDED.

Father's signature:

Mother's signature:

## FOR OFFICAL USE ONLY:

Scholarship Granted:

Amount (%):

Comments:

Admission Officer  
Signature:

Date: