



School Year	
Application No.	
Received on	
Recommendation	<input type="checkbox"/> Yes / <input type="checkbox"/> No

Application Form

Scholarships for Excellent Performance in Non-academic Areas

Nominated by Teacher (name of teacher: _____)

Part 1 Personal Particulars of Applicant (Student)

Name

_____ (in English BLOCK LETTERS)

_____ (in Chinese)

Date of Birth

Sex

M / F

Class Attending

Phone No.

Address

Conduct Grade in the past year: _____

Part 2 Category of Scholarships & Achievements

<i>Please tick '✓' the appropriate one(s) as shown below and complete Part 3 of this application form:</i>	
<input type="checkbox"/>	Visual Arts, Music, Dance or Sports
<input type="checkbox"/>	Best School Service
<input type="checkbox"/>	Best Leadership

Part 3 Details of Achievements

Outstanding Performance Award in *Visual Arts* / *Music* / *Dance* / *Sports*

Month & Year	Activities	Awards / Achievement

Best School Service (*provide consistent all-round service to the whole school in the academic year*)

Month & Year	Nature of Service	Supporting Information

Best Leadership (*demonstrated leadership qualities in the academic year*)

Leader in:	<input type="checkbox"/> Association, Name of the Association and position: _____ <input type="checkbox"/> House, Name of the House and position: _____ <input type="checkbox"/> Committee, Name of the Committee and position: _____ <input type="checkbox"/> Club, Name of the Club and position: _____	
Activities organized, please complete the following information:		
Month & Year	Activities	Leadership skills demonstrated

Part 4 (a) Recommendation from teachers

(b) Student's Self-account of aspirations (at least 200 words)

Part 5 Supporting Documents

Photocopies of the following documents should be submitted to School General Office with the Application Form:

- Certificates/Evidence (photos) of achievements and/or participation
- School report of past two years
- Other supporting documents, please specify: _____

Part 6 Declaration

I certify that the information provided in this form is ACCURATE and COMPLETE to the best of my knowledge.

Remarks:

1. *All applications will be assessed by the Scholarship and Fee Remission Committee and recommendations will be made to the Principal for approval.*
2. *Application with insufficient supporting documents will NOT be processed.*

Name of Teacher _____ Signature _____ Date _____

Name of Student _____ Signature _____ Date _____

To be completed by the Scholarship and Fee Remission Committee

Part 7 Recommendation and Approval

Date of Meeting _____

Recommendation Yes No

Reasons:

Name and Signature of the Scholarship and Fee Remission Committee:

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____