

## VISUAL ARTS AND DESIGN SCHOLARSHIP APPLICATION FORM

Student Name :
Year of Entry in 2020: 9 10 11 Boarder / Day Student
Parent/s Name/s :
Address : Street:
Suburb/Town: Postcode:
Phone : Mobile:
Family Email :
Preferred Art / Design Medium (eg. Painting) :
What do you hope to achieve with your art / design in the future ?
What are your interests?
Why would you like to come to NEGS?





What contribution would you hope to make to the School?		
DECLARATION		
I understand that if I am selectfollowing:	ted as one of the recipients of a Visual Arts and Design Scholarship at NEGS, the scholarship is conditional on the	
1. A scholarship holder wi	ll endeavour to maintain an appropriate level of academic achievement.	
2. In all areas of school lif	e, a scholarship holder must be a positive role model and fully support the ethos and values of the School.	
3. A scholarship holder wi	ll be expected to represent the school as and when requested.	
4. A scholarship holder's p	erformance will be reviewed annually in terms of her participation in the life of the School and her academic studies.	
provide incorrect or incomplet	y knowledge and belief, the information I have supplied in this application is correct and complete. I understand that if I is information this may result in the cancellation of any offer made by NEGS. I understand that if NEGS becomes aware ave provided false or misleading information in my application, my eligibility will be reassessed. I recognise it is my cessary documentation.	
We, the undersigned, agree th	e information provided in this application is not false or misleading and is a true representation as at the date below.	
Candidate's Signature:		
Date:		
Parent / Guardian Signature:		
Date:		
Please return the comp	oleted Application Form <b>AND</b> Application for Enrolment form (together with the documents referred to in that form) to:	
The Enrolments Office		



Uralla Road, ARMIDALE NSW 2350

NEGS