

St Philip’s Christian College - *Port Stephens*

# Academic Scholarship

## APPLICATION FORM - 2025

APPLICANT DETAILS

STUDENT’S SURNAME		GIVEN NAME	
DATE OF BIRTH		GRADE IN 2025	
CURRENT SCHOOL		GENDER	
I WISH TO ALSO BE CONSIDERED FOR THE GENERAL EXCELLENCE SCHOLARSHIP			

PARENT/GUARDIAN DETAILS

FATHER/GUARDIAN	TITLE		NAME	
MOTHER/GUARDIAN	TITLE		NAME	
ADDRESS				
SUBURB			POSTCODE	
TELEPHONE	HOME		MOBILE	
EMAIL				

DETAILS OF ACADEMIC ABILITY

Please state why you would like to be considered for an Academic Scholarship and explain why you would be a worthy recipient.

In support of my application, my achievements as a student can be described briefly as follows:			
Provide a brief summary of some of your key interests:			
Identify four words that describe you.			

## DECLARATION

I hereby apply for an Academic Scholarship for the above student at St Philip's Christian College, Port Stephens. I declare that the information provided is true and correct. I understand that acceptance of this application form does not constitute an offer of a Scholarship.

SIGNATURE OF PARENT/GUARDIAN		DATE	
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## APPLICATIONS MUST BE SUBMITTED TO THE CURRICULUM OFFICE BY 4 FEBRUARY 2024.

**NOTE:** *This application does not guarantee an interview. The criteria in the guidelines must be met. You will be contacted if you are successful or unsuccessful in gaining an interview.*

## DOCUMENTATION TO BE ATTACHED TO THIS APPLICATION

Copy of your latest School Report and Naplan Test Results.

Any other information relevant to this application.

If you are not a current SPCC student, a written statement explaining why you would like to attend SPCC and what it would mean to you.



### PLEASE RETURN THIS APPLICATION FORM TO:

Mrs Sarah-Jane Day  
Curriculum Administration  
St Philip's Christian College, Port Stephens  
182 Salamander Way or  
PO Box 342, Salamander Bay NSW 2317

Ph: 02 4919 5400  
Fx: 02 4919 5499  
ps.curriculumoffice@spcc.nsw.edu.au  
www.spccportstephens.nsw.edu.au