



2023 Scholarship Application Form

Please ensure that the information you provide is accurate and complete. A separate form has to be completed for each child.

Child's Personal Details

First Name		Date of Birth (DoB)	
Surname/Family Name		Place of Birth	
Religion		Country of Birth	
Nationality(ies)			
Gender	Male <input type="checkbox"/>	Applying for academic year	<input type="checkbox"/>
	Female <input type="checkbox"/>	Applying for year Group	<input type="checkbox"/>

Contact Details

Main Parent / Guardian Details

Status	Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Guardian <input type="checkbox"/>
Surname		First Name(s)	
Postal Address		Nationality	
		E-Mail Address	
Residential Address		Contact Number	
		NRC / Passport No	
Employer Name		Occupation	
Are you the main contact for any emergencies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you the account payer/billing contact?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Child's Language

Is English the child's first language?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Which other language(s) does your child understand and how would you assess their skill in these languages?		

Child's Talent and Interests

Please provide details of any talent, skill or hobby that your child may have, together with the level of proficiency	
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Declaration of Special Educational Needs

Please provide details of any Special Educational Needs / Learning Difficulties that you are aware of for your child	
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Details of Child's School

Name of the school that your child attends now?	
How many years has your child attended this school?	
Which year group or grade is your child in now (or just completed this academic year)?	

Brother and Sisters

Does your child have any brothers or sisters currently at any of the Educore schools? If yes, please list their name and classes

	Name	Year Group	School
1.			
2.			
3.			

Parental Declaration

I hereby grant permission for Trident College to contact my child's current school for any follow up information
Yes No

Form completed by (Name and Signature):		Date	
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