



SCHOLARSHIP APPLICATION FORM

STUDENT DETAILS

First Name:	Last Name:	Nickname:
Date of Birth:	Nationality:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Current School:	Class:	

SCHOLARSHIP DETAILS

Please indicate the scholarship that you are applying for. Students may apply for only one scholarship category.

- SECONDARY ACADEMIC SCHOLARSHIP** (Years 7-11)
- SIXTH FORM ACADEMIC SCHOLARSHIP** (Years 12 & 13)
- PERFORMING ARTS SCHOLARSHIP (MUSIC AND DRAMA)** (Years 5-13)
- GOLF SCHOLARSHIP** (Years 5-13)

ADDITIONAL INFORMATION (To support your application)

--	--

Signature:

Date:

Please complete the full application form and submit to the Admissions Department:
Tel: +66 2989 4873 Ext: 103 | Fax: +66 2989 4094 | Email: admissions@bromsgrove.ac.th
This form will be passed to the relevant department at Bromsgrove International School Thailand and they will contact you.