



MATAHUI SCHOOL

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INDEPENDENT SCHOOLS
OF NEW ZEALAND

MATAHUI SCHOOL SCHOLARSHIP APPLICATION

CONFIDENTIAL

Name of Student: _____ Date of Birth: _____

Present School: _____ Current Year Level: _____

Passport/Birth Certificate Number: _____ (please enclose a copy)

Parent/Guardian: _____

Address: _____

Telephone: Home: _____ Business: _____

Email: _____

Please attach the following information:

1. A copy of the recent school report and any other relevant information to support this application.
2. A personal statement from the family outlining reasons for attending the school and future plans.
3. The names of two people prepared to act as confidential character referees

Referees:

The following persons are prepared to act as Confidential Referees if required:

1. Name: _____

Telephone: Home _____ Business: _____

Email: _____

What is your relationship to the applicant? Please underline applicable response
Acquaintance – Friend – Business colleague – Family

2. Name: _____

Telephone: Home _____ Business: _____

Email: _____

What is your relationship to the applicant? Please underline applicable response
Acquaintance – Friend – Business colleague – Family

I/We certify that the information provided to support this application is true and accurate.

Signed:.....Parent/Guardian

Name:.....

Date:...../...../.....