## **Sport Scholarship Application Form**



Name			Date of Birth	D D M	M Y Y Y Y
Address					
				Postcode	
Email Address					
Has Gower College Sw	vansea offered you a place	on the course?	Yes □ No □		
Course applied for					
Name of contact at Go	ower College Swansea				
School					
Parent/guardian name	e and telephone number				
Area of i	nterest				
	area that you wish to apply	v for a sport schola	rshin in <i>(nlease tid</i>	ck the hov)	
Rugby	Football	Hockey		all 🗆	Cricket □
<b>2a.</b> What is your high	est achievement to date in	this area?			
<b>2b.</b> If you have repres	sented your area or county	please fill in the de	etails below:		
Which town, county o	r country you represented				
What your role was _					
When this last happer	ned				

<ol><li>How can you demonstrate your motivation and commitment to your interest.</li><li>what are your goals, how often do you practice, etc.</li></ol>	est (no more than 100 words)
<b>4.</b> Please indicate how the scholarship could help you develop your skills e.g (no more than 100 words)	. help with tuition, equipment, etc.
5. If this application is sucessful you will be invited for a final scholarship int	erview in August.
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Please include a reference from your current coach or teacher indica	ting your commitment and ability.
Signed	Date