

THE OLD HALEIANS' ASSOCIATION (INC.) SCHOLARSHIP TRUST

BURSARY APPLICATION

Student Details (please print)

Surname _____ First Names _____

Date of Birth _____ Current Academic Year _____

Current School _____

Please include the following documents with this application:

- A cover letter addressed to the Headmaster, which should clearly demonstrate the applicant's academic potential as well as his talents in a range of co-curricular areas. The letter should also document the applicant's leadership qualities and his capacity to become actively involved in all facets of school life.
- A copy of the applicant's birth certificate
- A copy of the applicant's last two school reports
- A letter of recommendation from the applicant's current School Principal
- A character reference by a person (not related) who has known the applicant for at least 2 years.

Privacy

The Old Haleians' Association, the trustees of the Old Haleians' Association (Inc) Scholarship Trust and Hale School collect personal information, including sensitive information about students and parents, during the course of administering a bursary application. The purpose of collecting this information is to enable the Association, the trustees and the School to consider and determine the application in accordance with the trust deed of the trust and applicable policies and procedures, and to properly administer the application and the bursary.

The Association, the trustees and the School may from time to time disclose to each other personal information collected from you or your son in relation to this bursary application for administrative purposes.

You may seek access to personal information collected by the Association, the trustees or the School about you or your son by contacting the Association. Your son may also seek access to personal information about him.

The Association, the trustees and the School from time to time engage in fundraising activities. Information received from you may be used to make an appeal to you. It may also be disclosed to organisations that assist the Association's, trustees' or School's fundraising activities solely for that purpose. Your or your son's personal information will not be disclosed to third parties for their own marketing purposes without your consent.

Please complete and sign where indicated below if you have attached all relevant documents to the application and consent to the matters set out above.

Parent/Guardian 1

Surname _____ First Names _____

Address _____

Signature _____ Date _____

Parent/Guardian 2

Surname _____ First Names _____

Address _____

Signature _____ Date _____