

STANLEY HARRIS AWARD APPLICATION



About the Candidate

Child's full name

Date of birth

School year

Current school

Name of head

School's address

Father's Details

Father's full name

Title

Occupation

Full address

E-mail address

Daytime telephone

Mother's Details

Mother's full name

Title

Occupation

Full address

If different

E-mail address

Daytime telephone

I wish to enter my son / daughter for the following assessments (choose a maximum of two):

- Academic Music Art Sport

Please use the reverse side of this form to provide information to support your child's application

I wish to apply for a means-tested bursary:

- Yes No

Signature of parent

