

Art Scholarship Application Form

PLEASE ATTACH
A RECENT
PHOTOGRAPH
HERE

PLEASE USE BLOCK CAPITALS AND COMPLETE IN BLACK INK

Candidate's details

Name: _____

Address: _____

Postcode

Telephone: _____

Date of birth: _____

Year Group on entry: _____

Proposed date of entry: _____

Present school: _____

Interests/hobbies: _____

Any art courses undertaken other than school: _____

Prizes or awards received: _____

Other artistic activities or relevant information: _____

On completion please return to:

The Registrar

Princethorpe College,
Princethorpe,
Rugby CV23 9PX



The
Princethorpe
Foundation

www.princethorpe.co.uk