



## APPLICATION FORM

### IRVIN JOHNSON SCHOLARSHIP FOR SECONDARY ENTRANCE ASSESSMENT

Member	
Member's Name:	
Member's Relation to Child (please tick appropriately)	Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/>
Home Address:	
Home Telephone Number:	
Work Telephone Number:	
Work Location:	
Account No.	

Child	
Name:	
Account No:	
Address:	
Primary School:	
Date of Birth:	
S.E.A. No:	
School for which child has passed:	
Pass Grade:	
<b>Documentation:</b>	Copy of Birth Certificate Copy of documents showing proof of guardianship (where necessary) Copy of Secondary Entrance Assessment Slip
<b>Eligibility of Applicant</b>	Must be a Junior Member for over one (1) year Must be an active member ☞ Parent must be in good standing in the Credit Union ☞ Must have achieved a pass grade of no less than 65%
<b>Completion of Application Form</b>	(a) All questions on the form <b>must</b> be answered. (b) Application <b>must</b> be certified and signed by the member.
<b>Parent/ Guardian's Signature</b>	
<b>Date:</b>	

**Deadline Date for Application Submission is September 4<sup>th</sup> 2017**