



THE BEACON

Guiding the next generation

HEADMASTER'S BURSARY

Application Form

Please complete this form and the Confidential Statement of Financial Circumstances. Scanned copies of both forms, together with necessary documentary evidence, should be submitted by email to the Director of Finance & Operations at dfo@beaconschool.co.uk

1. Your Child's Details

Surname _____

First Names (Please underline the name generally used) _____

Date of Birth ____ / ____ / ____

2. Parents'/ Guardians' Details

This section should be completed by all those persons with legal parental responsibility for the child.

Parent/Guardian 1

Title _____ Full Name _____

Occupation _____

Address _____

Postcode _____

Daytime Telephone _____ Evening Telephone _____

Mobile Telephone _____ Email Address _____

Parent/Guardian 2

Title _____ Full Name _____

Occupation _____

Address _____

Postcode _____

Daytime Telephone _____ Evening Telephone _____

Mobile Telephone _____ Email Address _____

3. Present School

Please state the name and address of your child's current school (with dates).

_____ from _____ to _____

Postcode _____

Name of Head _____

4. Your Child’s Experiences, Hobbies and Interests

Please outline any of your child’s artistic, dramatic, musical or sporting skills and/or experience (if applicable) together with details of his hobbies and interests.

5. Your Child’s Wellbeing

Please provide us with details of any medical conditions (including allergies), disabilities or learning difficulties.

6. Your Child’s Suitability

Please state briefly why you would like your son to attend The Beacon and how you think he could benefit from an education at the School.

7. Signatures of Parents/Guardians

First Signature _____ Second Signature _____

Name in full _____ Name in full _____

Relationship to the child _____ Relationship to the child _____

Date _____ Date _____