



APPLICATION FORM

GLC General Excellence Scholarship for Years 7 to 10

Student Information

Student Name	
Date of Birth	
Current School	
Current Year Level	
Year Level for Scholarship	

Parent / Guardian / Caregiver

Parent / Guardian / Caregiver Name	
Contact Phone Number	
Email	
Address	

Scholarship area you are applying for. Choose one area.

1a. Christian Life		1b. Leadership		1c. Community Service	
2. Sport					
3. Music					
4. Performing Arts					
5. Visual Arts					



Student achievement in chosen area

In the students own words, please outline your achievements in your chosen area.

GLC ST JOHN'S NEWTOWN

33 Aberdeen Street Newtown Victoria 3220
03 5221 5221
sjreception@glc.vic.edu.au

GLC ARMSTRONG CREEK

2-38 Burvilles Road Armstrong Creek Victoria 3217
03 5264 1038
acreception@glc.vic.edu.au

glc.vic.edu.au

Geelong Lutheran College Ltd.
ABN 38 656 530 004



Referee / Verification

Please provide one referee (eg. coach, music teacher, pastor etc) who can support and verify the information you have provided.

Referee Name	
Relationship with the Student	
Contact Phone Number	
Email	

Supporting Documents

Please attach to your returning email any additional documents you have to support this application. It may be letters of reference, certificates, performance programs, portfolios etc.

Declaration / Consent

We declare that the information provided is true and accurate to the best of our knowledge.

Student Name	Parent / Guardian / Caregiver
Student Signature	Parent / Guardian / Caregiver

Please return this form and any additional supporting documents as attachments by email to
acenrolment@glc.vic.edu.au

Please include 'General Excellence Scholarship' and your student's name in the title for easy identification.