

ANV DOBBS MEMORIAL SCHOLARSHIP

SCHOOL LEAVER APPLICATION FORM

Tenable Preference for a University Bachelor of Commerce Degree

Available for students who are about to enter University. Preference is given to those studying for the Bachelor of Commerce degree. This Scholarship will be awarded for the first three years of study provided satisfactory academic performance is maintained.

The value of the scholarship is dependent on the performance of the fund and number of applicants.

Surname						
First Names						
Thist Numes	•••••		••••••	•••••		
Address						
					Postcode	
Email				@		
Telephone	(Home)			(Mobile)		
Age				Date of Birth		
Attended CBHS from	n			to		
Name of University you are enrolled at (Attach confirm				confirmation)		
Course of Study:						
Academic Qualit	fications:					
NSN Number:						
NCEA Level 1 (list Ad	chieved, Mer	rits, Excellence)				
		Credit Numbers				
Subject		Not Achieved	Achieved	Merit	Excellence	Totals
Other Academic Resul	lts in Year 10/	11				

NCEA Level 2 (list Achieved, Merits, Excellence)

	Credit Numbers					
Subject	Not Achieved	Achieved	Merit	Excellence	Totals	
Other Academic Results in Year 12						
NCEA Level 3 (list Achieved, Merits, Excellence) to date Credit Numbers						
Subject	Not Achieved	Achieved	Merit	Excellence	Totals	
Other Academic Results in Year	13					
Other Qualifications or Awards						

School Awards or Prizes	
School Responsibilities	
Sporting & Cultural Activities	
Other Organised Activities	
Habbies Interests 9 Wider Community Involvement	
Hobbies, Interests & Wider Community Involvement	

·	,	ipletion of your course	(50 words or less)
Signature		 	Date:

PLEASE ATTACH

Confirmation of University enrollment and course for 2024

Payment Instructions form and confirmation of account.

RETURN TO:

Amiee Griffiths
Executive Assistant to the Headmaster
Christchurch Boys' High School,
PO Box 8157, Christchurch 8440

Email: scholarships@cbhs.nz

Closing Date for Applications: 28 February



Christchurch Boys' High School Scholarship Payment Instructions

Payment of CBHS scholarships to successful students will be made electronically.

Please nominate a bank account for this purpose.

Name:			
Account Name:			
Account Number:(Please attached printed confirmation of ac			
I confirm the above bank account is correct	for payment of a	CBHS Scholarship awarded to m	ne:
Scholarship Sir Arthur Sims ANV Dobbs John Wilson	Bicker AD Te	nch	ordon and Mary Vincen
Signature		Date:	
For Office Use only Scholarship Awarded:			
ANV Dobbs Scholarship	\$	Sir Arthur Sims Scholarship	\$
John Wilson Memorial Scholarship	\$	AD Tench	\$
Bickerton Widdowson Scholarship	\$	JF Moffat	\$
Gordon and Mary Vincent Scholarship	\$		
Date Paid / / Signed:			