

**SECONDARY SCHOOL SCHOLARSHIP PROGRAM  
APPLICATION FORM 2016-2017**

Glue or paste  
(do not staple)  
One passport photo  
of yourself

Name \_\_\_\_\_  
(First name) (Family name)

Female  Male

**Program preference**

Please check  the box to the left of each program for which you wish to be considered. Please also rank your choices (1st, 2nd, 3<sup>rd</sup> and 4th) to the right. This helps the interviewers a great deal and does not influence your selection for a scholarship.

ASSIST \_\_\_\_  Davis \_\_\_\_  HMC \_\_\_\_  HMC Reduced fee \_\_\_\_

**1. BIOGRAPHICAL INFORMATION**

**Home Address:**

Street \_\_\_\_\_ Citizenship \_\_\_\_\_  
 ZIP + Town \_\_\_\_\_ Nationality \_\_\_\_\_  
 Tel. +421 \_\_\_\_\_ Mobile +421 \_\_\_\_\_ Place of Birth \_\_\_\_\_  
 E-mail \_\_\_\_\_ Fax +421 \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 (E.g. March 14, 1989)

**2. EDUCATION**

School \_\_\_\_\_ Grade \_\_\_\_\_  
 Day / Board school \_\_\_\_\_ Type (regular-R / bilingual-B) \_\_\_\_\_  
 Year in which you will finish \_\_\_\_\_ If bilingual, in what language? \_\_\_\_\_

**English**

How many years have you studied English? \_\_\_\_\_ Grades/scores (average) \_\_\_\_\_  
 Number of English language lesson hours per week (without conversation lessons) \_\_\_\_\_  
 Number of English conversation lessons / hours per week \_\_\_\_\_  
 Other English studies \_\_\_\_\_  
 Other languages (years, proficiency) \_\_\_\_\_

**3. ACADEMIC PREFERENCES**

List the academic subjects that interest you the most \_\_\_\_\_  
 \_\_\_\_\_

Honors / awards won in the last three years \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What field of study or future profession are you considering? \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_

**4. FAMILY INFORMATION**

	<i>Father</i>	<i>Mother</i>
Parent's Name in Full	_____	_____
Living/Deceased	_____	_____
Together/Divorced/Separated	_____	_____
Name of Stepparent (if applicable)	_____	_____
Country of Birth	_____	_____
Home Address (If different from applicant)	_____	_____
Telephone (preferably cell phone)	_____	_____
E-mail	_____	_____
Profession	_____	_____
Employer	_____	_____
Work Address	_____	_____
Work Telephone	_____	_____
Work E-mail	_____	_____

Brothers and Sisters	Sex	Age	Occupation	Living at home?	Participated in this program?
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**5. TRAVEL AND STUDY ABROAD**

Have you ever lived away from your family? (Include dates/place/purpose)  
 \_\_\_\_\_

Have you ever or lived or studied abroad? (Include dates/place/purpose)  
 \_\_\_\_\_

**6. SELF ASSESSMENT:** What 3 words would you choose to describe yourself?

\_\_\_\_\_

Name \_\_\_\_\_

**Extracurricular and Personal Interests**

1. List the **performing arts** that interest you most and in which you participate. Note any instruments you play, any musical groups to which you belong (vocal or instrumental); any dance or theater groups to which you belong and always mention for how long Please note any awards you have won during the last three years.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

2. List the **visual arts** that interest you most and in which you participate (for example, painting, drawing, ceramics, photography). Please note any awards you have won during the last three years.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

3. List the current **sports (athletic activities)** you play and for how long. Note team, position and honors won, if any.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

4. List the **clubs, organizations or community service groups** to which you belong. Note how long you have been involved, the purpose of the group, and your role in it.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

***My signature below indicates that all the information provided in this application is complete and correct to the best of my knowledge, and that the essay is my work alone.***

Signature of candidate ..... Date .....

***As the parent / guardian of the above – named candidate, I agree that my son / daughter / ward will be an applicant for the NOS – OSF Slovakia Secondary School Scholarship. I agree with the conditions of the competition.***

Parent's / Guardian's signature ..... Date .....

***For parents of applicants who wish to be considered for the HMC program:  
I understand and agree that my son/daughter will come home for the Christmas and Easter holidays and that I will meet the costs of transport to and from the UK at the beginning and end of each term.  
I confirm that combined parental income during 2015 will not have exceeded the equivalent of £30,000.***

Parent's / Guardian's signature ..... Date .....