

# EQUINE SCHOLARSHIP

## APPLICATION FORM

1. I would like to apply for a try-out for an Equestrian Scholarship and school entrance test for my child, named below, with a view to him/her entering Polwhele House School.
2. I have read the information concerning Equestrian Scholarships and, if my child is accepted, I undertake:
  - a) to see that he/she attends all the commitments specified on the equestrian scholarship information sheet, and to encourage him/her in punctuality and good conduct in the school;
  - b) I understand that the scholarship is added value to the education provided at Polwhele House.

### PERSONAL DETAILS

Name of applicant:

Date of birth:

Gender:

Address:

Postcode:

Parent 1/Guardian

Address:

Postcode:

Email:

Occupation:

Tel (mob):

Parent 2/Guardian

Address:

Postcode:

Email:

Occupation:

Tel (mob):

Polwhele House, Truro, Cornwall, TR4 9AE  
polwhelehouse.co.uk  
01872 273011



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## EDUCATION

Current school

Address

Name of Head Teacher:

School email:

Tel :

## VOCATIONAL TRAINING

Name of riding  
teacher/riding school

Address

Email:

Tel

Name of riding  
teacher/riding school

Address

Email:

Tel

Pony Club Level passed including Club name and date. Any recent competitions undertaken noting discipline, result, place and date:

**How did you hear about the Polwhele House Equestrian Scholarship?**

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Signed:

Parent 1/Guardian

Date

Signed

Date

Parent 2/Guardian

**Please email this form with a recent photograph of your child to the school secretary ([office@polwhelehouse.co.uk](mailto:office@polwhelehouse.co.uk)).**

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