

GIRLS YEAR 9 SPORTS SCHOLARSHIP, 2020-2021

Please ensure that you provide as much detail as possible on this application form and continue on extra paper, if required. The Director of Girls' Sport will use the content of application forms along with any additional coach/instructor references provided as the first stage of assessment for the Sport Scholarship. If your daughter is shortlisted, the practical assessment day will be held on **Wednesday 29 January 2020**.

Candidate's Name:											
Criteria for selection: Ple	ease ref	fer to t	the 'm	inimu	ım staı	ndards for application' doc	cumen	t.			
	below	. The				ut your child's sporting of the activities offered to					
Sporting Activity	Participated	School Club	School Team	Outside Club	Further Representation	Sporting Activity	Participated	School Club	School Team	Outside Club	Further Representation
Athletics						Skiing					
Tennis						Golf					
Hockey						Horse Riding					
Netball						Other					
Cricket											
Swimming*											
* please provide swimming times	3				l						
	ng wh	ich ac	tivity,	the :	name	specialised coaching outs of the club and the nam gion and Country.					

If you wish, please submit a reference from your child's teacher, coach or instructor. Please give details of any of the following, which your child has achieved:

	Sporting Activities
Grades	
Tests	
Competitions	
Records/Personal	
Bests	
swimming/athletics)	
Best Sporting	
Achievement	

The successful candidate will be expected to participate fully in the sporting life of the school. If your child were to be awarded the New Hall Sport Scholarship, in what ways do you think she would be able to contribute to the sporting life of the school?

If your child attends the Sport Scholarship assessment session she will be asked to participate in several activities, in order to

- demonstrate ability to warm up for sporting activity,
- show general mobility, flexibility and agility,
- show ball skills in at least two areas,
- show running and swimming ability.

Her knowledge and understanding of the activities will also be assessed.

Please list below the three sports you would like your daughter to be assessed for in order of preference:

Sport	Order of preference (number 1-3)
Athletics	
Tennis	
Hockey	
Netball	
Cricket	
Swimming	

I certify that my child can swim 100 metres and is confident and happy in the water.

I also agree to authorise members of staff, during the course of the visit, to approve such medical treatment for my child as is deemed necessary in an emergency on the advice of a qualified medical practitioner. I have stated on this form any medical condition/disability from which my child is suffering, together with details of the treatment required.

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Parent's Signature:	Date: