

Scholarship Application

Please return your completed form to

Newstead Athletics Inc.
POST: PO Box 1594
Launceston
Tasmania 7250



EMAIL: newsteadathletics@bigpond.com

Athlete Details

NAME

STREET

CITY / TOWN

STATE

PostCode

E-mail

Phone

Date of Birth

Parent / Guardian Detail

Athlete lives with parent

Yes

I am over 18

skip to next section

No

Parent/Guardian

Phone

E-mail

Coach Detail (if you have one)

Name

Phone

E-mail

Sporting Details

Sport you wish to be considered for (Tick all that apply)

Cross Country

Field Events

Road Running

Track Events

Road Race Walks

Half or Full
Marathon

Have you previously been granted a Newstead Athletics
Scholarship?

If yes then please provide the year (s)

Yes

No

Athlete Performance Category

Please Choose ONE

1. National: Athlete represents Australia at an international level event or Athlete is a member of an Australian squad and has Australian squad training commitments
2. State: Athlete is a member of a state team program or Athlete is a member of a state squad, or Athlete is vying for selection into a state team
3. Region: Athlete has been successful at a regional level and has been recognised as having potential to meet one of the above categories in the short-term future
4. School: Athlete has produced outstanding results in school Athletic competition and has been recognised as having potential to meet one of the above categories in the short-term future

Personal Hardship

Are you applying for a personal hardship scholarship? If so attach relevant documentation detailed in the policy

Yes

Sporting Achievements (please list at least THREE in the last TWO years) Attach if you want to include extra

Year	Competition Name	Achievement	Event
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Year	Competition Name	Achievement	Event
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Year	Competition Name	Achievement	Event
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Year	Competition Name	Achievement	Event
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In 150 words or less, why are you a worthy recipient of this scholarship. (attach if not enough room)

Declarations

I hereby certify that to the best of my knowledge, the information given above and in the attached documentation is correct. I acknowledge that the sponsorship support places obligations on myself, which I agree to meet. I also acknowledge that failure to meet these obligations might place further funding in jeopardy.

Coaches Signature

Date

Athletes Signature

Date

Parent / Guardian (if under 16)

Date