

| rotary club of rockingham scholarship application form |
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| Applicant Information |
| Name: |
| Date of birth: | Gender: M F | Phone: |
| Current address: |
| City: | State: | Postcode: |
| Year of Apprenticeship/Traineeship: 1st year 2nd year 3rd year 4th year | Email: |
| Employment Information |
| Current employer: |
| Employer address: | Length of employment: |
| Phone: | E-mail: | Fax: |
| City: | State: | Postcode: |
| Position: | Annual income: |
| TRAINING Information |
| Current Training Organisation (RTO): |
| RTO address: |
| City: | State: | Postcode: |
| Phone: | E-mail: | Fax: |
| Trainer/Lecturer’s name: |
| Emergency Contact |
| Name: |
| Address: | Phone: |
| City: | State: | Postcode: |
| Relationship: |
| References |
| Name | Address | Phone |
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|  |  |  |
| Signatures |
| I authorise the verification of the information provided of my application in its entirety as to my employment and study.  |
| Signature of applicant: | Date: |

**SUBMIT APPLICATIONS AND ALL SUPPORTING DOCUMENTATION TO: rotaryclubofrockinghamwa@gmail.com**