



PEPONI SCHOOL

i6+ Scholarship Application Form

Information

A full Peponi School application will be required when applying for the Peponi School Scholarships. Details will be shared by the Registrar. Applicants must submit copies of their most recent academic reports, demonstrating a minimum achievement of **A* to B** grades in all subjects.

Please ensure this Scholarship form is completed in full before returning to: registrar@peponischool.org

Deadline - Wednesday, 12th February 2025

Candidate Details

Pupil Name		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Current School		D.O.B:	

Compulsory Papers - Part I

Mathematics

English

General Paper

Optional Papers - Part II

Please pick 2 papers from the list:

- | | |
|--|---|
| <input type="checkbox"/> Mathematics II | <input type="checkbox"/> Geography |
| <input type="checkbox"/> English Literature | <input type="checkbox"/> History |
| <input type="checkbox"/> Physics | <input type="checkbox"/> Economics and Business Studies |
| <input type="checkbox"/> Chemistry | <input type="checkbox"/> Ethics and Philosophy |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Social Science |
| <input type="checkbox"/> Modern foreign Language
(either <input type="checkbox"/> French or <input type="checkbox"/> Spanish) | |

Extended Writing - Part III

All candidates are required to submit a hard copy of their Extended Writing at registration.

The topic can be anything of interest to the candidate with a word count of 800-1000 words.





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Reference Request

All candidates will be required to submit a reference from a teacher in one of the chosen areas below. The reference should be submitted at the time of application. Please specify one:

- | | | |
|--------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Music | <input type="checkbox"/> Drama | <input type="checkbox"/> Sport |
| <input type="checkbox"/> Art | <input type="checkbox"/> Debating | <input type="checkbox"/> Leadership |

Additional Information

Emergency Contact Details 1

Emergency Contact Details 2

Name:	Name:
Phone:	Phone:
Email:	Email:

Medical Information and Dietary Requirements

Please specify any medical and dietary information that we need to be aware of in the box below.

Declaration

I confirm that I would like to apply for the 16+ Scholarship for my son/daughter.

FATHER

MOTHER

Full Name:	Full Name:
Signature:	Signature:
Date:	

Please return to registrar@peponischool.org
www.peponischool.org

