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| **Hockey Scholarship Application Form** | | | | |
| **Student Details** | | | | |
| Forename | Click or tap here to enter text. | Surname | | Click or tap here to enter text. |
| Date of Birth | Click or tap here to enter text. | Year applying for | | Choose a year. |
| **Parent/Guardian Details** | | | | |
| Forename | Click or tap here to enter text. | Surname | | Click or tap here to enter text. |
| E-mail | Click or tap here to enter text. | Phone Number | | Click or tap here to enter text. |
| **Player Profile** | | | | |
| Club/School | Click or tap here to enter text. | Position | | Click or tap here to enter text. |
| Honours | Click or tap here to enter text. | | | |
| Other sports you participate in and level played | Click or tap here to enter text. | | | |
| **Player Statement** (explain why you would make an exceptional hockey scholar, max 200 words) | | | | |
| Click or tap here to enter text. | | | | |
| Where did you hear about the scholarship? | | | | |
| Click or tap here to enter text. | | | | |
| **Link to Video Footage** (it would be beneficial if you could provide a link to footage of you completing key skills and playing in a match situation, 10 minutes maximum) | | | | |
| Click or tap here to enter text. | | | | |
| **Reference Details** (this should be a coach or teacher) | | | | |
| Forename | Click or tap here to enter text. | Surname | Click or tap here to enter text. | |
| E-mail | Click or tap here to enter text. | Phone Number | Click or tap here to enter text. | |
| **Important information:** Please e-mail the completed form to [scholarships@doyrms.com](mailto:scholarships@doyrms.com) We aim to review application forms within 2 weeks of receipt and will then e-mail the named Parent/Guardian. We will advise if the player has been shortlisted to the final stage of application at this point. Unfortunately, due to large numbers of applications, we cannot provide individual feedback at this point. Successful applicants will then move through the School’s entry process and will be required to provide extended video footage, attend an assessment day or a representative of the School will come and watch them. Many thanks for taking the time to complete this form. | | | | |