



Manuka Road
 Berwick, Victoria 3806
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HIGH ACHIEVERS PROGRAM 2018

APPLICATION FOR HIGH ACHIEVERS PROGRAM SELECTION TEST

I wish my child to be considered as an applicant and tested for the High Achievers Program at Berwick College.

CHILD'S SURNAME: _____ CHILD'S GIVEN NAME: _____

MALE FEMALE DATE OF BIRTH: ____ / ____ / ____

PARENT'S NAME: _____

HOME ADDRESS: _____

EMAIL: _____

HOME PHONE: _____ MOBILE: _____

CURRENT PRIMARY SCHOOL: _____

NEAREST SECONDARY COLLEGE: _____

- Please attach:**
- A copy of the latest NAPLAN results
 - School report (*most recent written report*)
 - Letter written by student on why they would like to be considered for this program

I include \$60.00 for administration and testing fees. I understand that this payment is non-refundable.

(Please tick) Cheque Cash Mastercard Visa

Card Number:

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Expiry Date: ____ / ____

PARENT/GUARDIAN SIGNATURE: _____ DATE: ____ / ____ / 2017

Applications and fees are due by Friday 28th April, 2017. Late applications will not be accepted.
 Main testing will be held on Saturday 13th May 2017, starting promptly at 9:30am.
Please arrive at 9:00am for a 9:30am start.