



**THE JANNALI  
HIGH SCHOOL**  
CONNECT | THRIVE | ACHIEVE

Attach a recent passport size photograph of the student in this space

## 2025 Creative & Performing Arts Drama SCHOLARSHIP APPLICATION

*Applications are due to The Jannali High School by Monday, 1 July 2024*

### Personal Details

Student name: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current school: \_\_\_\_\_

Name of Parent(s) / Carer(s): Mr / Mrs / Ms \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (m) \_\_\_\_\_

Parents email address: \_\_\_\_\_

Drama/Performance experience and interest: (Please detail below or provide additional documentation on your Performance Experiences)

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Signature of Parent/Carer: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return this application to:  
Ms Elizabeth Sardi, Drama Teacher by, Monday, 1 July 2024



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This form should be given to the **Principal of the child's current school**.  
The Principal or delegate will email (jannali-h.school@det.nsw.edu.au) this form directly to TJHS.

Student name: \_\_\_\_\_

Current school: \_\_\_\_\_

Principal's Comment (or Principal's delegate e.g. Deputy Principal, Stage Coordinator)

Rate the student on the following statements by placing a cross in one of the squares on the continuum	Poor	Fair	Good	High	Excellent
The student is a cooperative member of the school					
The student's contributions to the school are					
The student acts responsibly					
The student's attendance record is					
The student's level of commitment to his/her studies is					
The student's ability to work cooperatively with others is					
The student's leadership skills and abilities are					
The student's literacy skills are					
The student's numeracy skills are					
The student's behaviour is					

Comment on the student's suitability for a place in a high school gifted & talented dance program.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other relevant details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any special needs that the student may have:

\_\_\_\_\_  
\_\_\_\_\_

Overall Rating: Please tick the most appropriate box:

Recommended with some concerns  Recommended  Highly Recommended

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Signature: \_\_\_\_\_