GOON YEE TONG LIMITED
澳洲東莞同鄉會公義堂

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高中畢业生成绩优異奖学金申请表
Annual H.S.C. Scholarship Application Form

申请人 (姓) (名)
Applicant (Surname) : _____(Given Name) :_____

地址
Address : _____ Post Code : _____ Email_____

电话号码 出生日期 出生地点
Telephone No. : _____ Date of Birth : _____ Place of Birth : _____

高中学习科目
H.S.C. Subjects 1. _____ 2. _____

3. _____ 4. _____ 5. _____

高中在何校读书
Name of High School/College : _____

将志愿到何大学读何科目
Name of Proposed University and Course : _____

申请日期 申请人签名
Date of Application : _____ Signature of Applicant : _____

赞助会员 (姓) (名)
Sponsoring Member : (Surname)_____ (Given Name) : _____

赞助会员号码 与学生关系
Membership No. : _____ Relationship to Applicant : _____

会员地址
Address : _____Post Code : _____Email_____

电话号码 赞助会员签名 日期
Telephone No. _____ Signature of Sponsoring Member _____ Date : _____

Terms & Conditions

1. An applicant must be resident in the state of New South Wales, a direct descendant of the Dongguan county and whose father is currently a financial full member of Goon Yee Tong Inc. and has been so for a minimum of one year.
2. The awarding of the scholarships will be based on the New South Wales H. S. C. results with a minimum ATAR of 95.
3. All applicants must satisfy our assessment procedures and the Judge's decision is final and no further correspondence will be entered into.
4. It is the responsibility of the applicants to notify and supply a verified (by a JP) copy of his/her ATAR results to Goon Yee Tong no later than 15 days after their publication.
5. Please provide a statement in about 500 words on some ideas or suggestions on how our association could improve the services, administration or attract younger members in order to move forward in this ever changing world.

下列由办公处填写
For Office Use Only

收表日期 Date of Receipt of Application / /	影印日期 Date of Photocopy of ATAR	成绩 ATAR
收表人签名 Receiver's signature	会长/秘书签名 President's/Secretary's signature	附注 Remarks