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This information is confidential and only for the use of St Martin's Lutheran College

Student Surname			
Student First Name			
Date of Birth		Gender	M      F Not Specified
Current School		Year Level in 2025	
Enrolment Status at St Martins	Current Student, Confirmed Place, Waiting List, Not Registered		
Parent/Guardian Full Name			
Telephone			
Parent/Guardian Email			

**Scholarship Test Booking ±Please Circle One**

Saturday

Year _____ Age _____
Name of the Achievement _____
Your Result _____
Year _____ Age _____
Name of the Achievement _____
Result _____
Year _____ Age _____
Name of the Achievement t _____
Result _____







