

SCHOLARSHIP APPLICATION AT SCHULE SCHLOSS SALEM

 $These \ documents \ should \ be \ submitted \ in \ time \ before \ the \ application \ deadline:$

■ Handwritten letter of application that awakens our interest and shows your qualification for the scholarship and your special achievements (approx. 2 pages)

INFORMATION ABOUT THE APPLICANT	
Last name:	
First name:	
l agree to the terms of application. The general terms of admission to Schule Schloss Sale general terms for the award of partial scholarships (see website).	em apply as well as the
Place, date and applicant's signature	
We request a reduction of the monthly school and boarding school fees in the an	mount of:
500 € per month (basic scholarship, without proof of income tax)	mount of:
500 € per month (basic scholarship, without proof of income tax) 1,000 € per month (only with presentation of the income tax assessment*)	mount of:
500 € per month (basic scholarship, without proof of income tax) 1,000 € per month (only with presentation of the income tax assessment*) 1,500 € per month (only with presentation of the income tax assessment*)	mount of:
500 € per month (basic scholarship, without proof of income tax) 1,000 € per month (only with presentation of the income tax assessment*)	mount of:
500 € per month (basic scholarship, without proof of income tax) 1,000 € per month (only with presentation of the income tax assessment*) 1,500 € per month (only with presentation of the income tax assessment*) 2,000 € per month (only with presentation of the income tax assessment*)	ncome and financial circumstances of the family.

 \blacksquare Report cards (class 5 to present class) as photocopies



APPLICATION FOR ADMISSION TO SCHULE SCHLOSS SALEM

APPLICATION	N FOR				
Grades 5 – 10 8	t 10 <i>PLUS</i> (in Germ	ıan)	For s	school year:	
International Cl	lasses, Grades 8 –	10 (in English)	For	year group:	
Abitur (Grades	11 & 12)		We	request an admissio	ns interview on (date):
International Ba	accalaureate (Grad	les 11 & 12)			
INFORMATIC)N ABOUT T	THE APPLICAN	NT (STUDENT)		
Last name:					
First name:					
Female	Male	Divers			
Date of birth, place: Home address:					
E-Mail:					
E-Mail: Citizenship:			Religious	denomination:	
	ear group:		Religious ————	denomination:	
Citizenship:	ear group:		Religious 	denomination:	
Citizenship:	rear group: Primary	Middle	Religious Comprehensive	denomination: High School	Other
Citizenship: Current school and y	Primary	Middle 12 Years			Other
Citizenship: Current school and y Type of school	Primary m:		Comprehensive 13 Years		



INFORMATION ABOUT THE STUDENT'S FAMILY

Legal guardianship: Both Mother Father Mother Father Last name: First name: Address: Telephone: E-Mail: Occupation: Siblings: Names and years of birth: The initiative for considering enrolment in a boarding school came from the: Parents Student What is your greatest desire for the future development of your child? How do you expect your child to benefit from being schooled at Schule Schloss Salem? Has your child had to change schools in the past (other than normal transition)? If so, when and why:



In order to provide optimal pastoral care for your child, it is important for us to acquire as broad a picture as possible. Information about health and current living circumstances is essential for us in order to support your child and, if necessary, assist with known issues in the future.

Therefore we ask you to provide as much detailed information as possible in this section:

1.	Has your child ever shown	difficulties with learning or	in regard to classroom behaviour in his or her previous schooling?					
	No	Yes						
	If so, has your child been tested positively for any of these special educational needs?							
	ADD / ADHD	No	Yes: when					
	Dyslexia	No	Yes: when					
	Dyscalculia	No	Yes: when					
	Academically gifted	No	Yes: when					
	In case of positive testing	, have you received a written	professional assessment? If yes, please hand in a copy.					
	No	Yes						
2.	Has your child ever had difficulties with social integration in his or her year group or school community?							
	No	Yes: please describe						
3.	Has your child ever been under psychological observation (at school) or treated for a problem, such as an eating disorder,							
	self-harming behaviour, o							
	No	Yes: please describe						
4.			ue to past or present illnesses?					
	No	Yes: please describe						
_								
5.			child's family life or social environment?					
	Separation of parents		and the state of friends					
		within the immediate family o	or your child's circle of friends					
	Other							



GENERAL INFORMATION

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пow	ala vou	TIPST	become	aware	OI 3	schule	Schloss	Salem?	Please	select	oniv c	ne	answer.

Family member is a former Salem student	Flyer/brochure	Social Media (LinkedIn, Facebook, Instagram, Youtube)
Recommendation by former Salem students	Advert received in the mail/post	(virtual) educational fair
Recommendation by friends/acquaintances	Advertisement in a (daily) newspaper	Scholarship advertisement
Internet research (e. g. google)	Editorial contribution (press report or TV contribution)	
Recommendation from parents of current Saler	n students	
Advice from an agency/boarding school counse	lor:	
Other:		
B-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		

Salem will handle your personal data and information with strictest confidentiality and will share details, if necessary, only with the appropriate members of staff at Schule Schloss Salem.

We hereby confirm the receipt of the information sheet "Information about the Processing of Your Personal Data by Schule Schloss Salem" and give our consent.

Place, date / signature(s) of parent(s)

Please submit only a fully completed application, which includes:

Annual report cards from grade 5 onwards as photocopies (applications for grade 5 and 6: School reports of the past two years)

Personal, hand-written statement by your child (using form on page 5 below)

Applicants for grade 9 and above: Curriculum vitae (CV) in tabular form

Please ensure that all documentation reaches the admissions office one week prior to the requested date for an admission interview.

Please send your application by e-mail to

admissions@schule-schloss-salem.de

or by post to: Schule Schloss Salem, Admissions Office, Schlossbezirk 1, 88682 Salem, Germany



PERSONAL STATEMENT (to be handwritten by the student)

Last name, First name:
How would your best friends describe you? List five characteristics.
What do you see as your greatest strengths or special abilities?
What are your greatest weaknesses?
What are your favourite activities in your free time?
Do you play a musical instrument? For how many years now? Have you ever played in an orchestra or a band?
Do you engage in one or more sports regularly or even in competitions?
Have you ever participated in a summer camp, a student exchange programme or a language course abroad?
What do you think could be changed or improved at your present school (for example, lessons, teachers, etc.)?