

# SCHOLARSHIP APPLICATION AT SCHULE SCHLOSS SALEM

## INFORMATION ABOUT THE APPLICANT

Last name: .....

First name: .....

PHOTO

I agree to the terms of application. The general terms of admission to Schule Schloss Salem apply as well as the general terms for the award of partial scholarships (see website).

.....  
Place, date and applicant's signature

### We request a reduction of the monthly school and boarding school fees in the amount 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\*)

2,500 € per month (only with presentation of the income tax assessment\*)

\* Beyond this base scholarship an additional sum can be granted in consideration of the income and financial circumstances of the family. The own contribution is at least 1 % of the gross annual income of the legal guardian(s).

.....  
Place, date and parents' signature

.....  
Place, date and parents' signature

### 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)
- Report cards (class 5 to present class) as photocopies

# APPLICATION FOR ADMISSION TO SCHULE SCHLOSS SALEM

## APPLICATION FOR

Years 5 – 10 & 10Plus (in German)

International Classes, Years 8 – 10 (in English)

Abitur (Years 11 & 12)

International Baccalaureate (Years 11 & 12)

For school year: \_\_\_\_\_

For year group: \_\_\_\_\_

We request an admissions interview on (date):

\_\_\_\_\_

## INFORMATION ABOUT THE APPLICANT (STUDENT)

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Female

Male

Divers

Date of birth, place: \_\_\_\_\_

Home address: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Religious denomination: \_\_\_\_\_

Current school and year group: \_\_\_\_\_

Type of school      Primary      Middle      Comprehensive      High School      Other

Current school system:      12 Years      13 Years

Native language (with written skills): \_\_\_\_\_ Current language of instruction: \_\_\_\_\_

Foreign languages at school (and for how many years): \_\_\_\_\_

\_\_\_\_\_



## INFORMATION ABOUT THE STUDENT'S FAMILY

Legal guardianship:

Both	Mother	Father
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	Mother	Father
Last name:	<hr/>	<hr/>
First name:	<hr/>	<hr/>
Address:	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Telephone:	<hr/>	<hr/>
E-Mail:	<hr/>	<hr/>
Occupation:	<hr/>	<hr/>

Siblings:

Names and years of birth:

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The initiative for considering enrolment in a boarding school came from the:

Parents	Student
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What is your greatest desire for the future development of your child?

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How do you expect your child to benefit from being schooled at Schule Schloss Salem?

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Has your child had to change schools in the past (other than normal transition)? If so, when and why:

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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, or depression?

No Yes: please describe

4. Does your child currently experience any limitations due to past or present illnesses?

No Yes: please describe

5. Are there currently any special circumstances in your child's family life or social environment?

Separation of parents / new partnership

Severe illness or death within the immediate family or your child's circle of friends

Other

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## GENERAL INFORMATION

How did you first become aware of Schule Schloss Salem? Please select **only one** 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 Salem students		
Advice from an agency/boarding school counselor:		
Other:		

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:

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How would your best friends describe you? List five characteristics.

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What do you see as your greatest strengths or special abilities?

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What are your greatest weaknesses?

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What are your favourite activities in your free time?

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Do you play a musical instrument? For how many years now? Have you ever played in an orchestra or a band?

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Do you engage in one or more sports regularly or even in competitions?

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Have you ever participated in a summer camp, a student exchange programme or a language course abroad?

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What do you think could be changed or improved at your present school (for example, lessons, teachers, etc.)?

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