



# SOLIHULL

## SPORT SCHOLARSHIP REFERENCE FORM

This form should be completed by a referee from the applicant's school, club or representative team

Name of Applicant:		
Referee's details		
Name of Referee:		
School/Club/Team:		
Position Held:		
Sport Information		
Please list the sport(s), positions and successes of the teams in which the applicant has played		
Sport	Position	Success
Please comment on the following attributes of the applicant		
Speed:		
Strength:		
Stamina:		

**Please comment on the following attributes of the applicant**

**Hand-eye coordination:**


**Agility:**


**Spatial Awareness/Games Sense:**


**Commitment to the Sport/Team/Club:**


**Does this applicant show leadership, teamwork and sportsmanship qualities within your team?**


**Any further comments to support the application:**


Please return completed forms to:  
Admissions Registrar, Solihull School, Warwick Road, Solihull, West Midlands, B91 3DJ. Tel: 0121 705 4273