



HR Licence Scholarship Application Form



APPLICANT INFORMATION

Name	Date of Birth / /	☐ Male ☐ Female
Address		
City	State	Postcode
Phone	Email	
Current licence	☐ Yes ☐ No	Do you have any restrictions on your current licence? ☐ Yes ☐ No

BRIGADE INFORMATION

Which VFRS Brigade are you a member of:		
Length of service:		
What other qualifications have you gained:		
Captain or Office Bearer Approval	Name	Signature

PERSONAL STATEMENT

Please provide a paragraph stating why you would be a worthy recipient of the scholarship and how this will improve your brigade:

AGREEMENT

By signing and submitting this application form the applicant agrees to remain an active member of the above mentioned Volunteer Fire and Rescue Service for a period of twelve (12) months after gaining their HR Licence.

Applicant signature

Date