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**Moore Markhams Wairarapa Ltd**

**Accounting Scholarship**

**APPLICATION FORM**

|  |  |
| --- | --- |
| **Student Information** | |
| Family Name: |  |
| First Name/s: |  |
| Date of Birth: |  |
| Postal address: |  |
|  |  |
|  |  |
| Email address: | (*Please note that we will acknowledge receipt of your application via your email address after the published closing date of the scholarship*) |
| Mobile number: |  |
| Lincoln Student ID Number:  *(if known)* |  |

|  |  |
| --- | --- |
| **Academic Information** | |
| Academic Distinctions: |  |
| Course of Study at Lincoln: |  |
| Year of study |  |

|  |  |
| --- | --- |
| **Financial Information** | |
| Financial assistance being received or expected:  *(other scholarships, bursaries, awards, student allowances, etc)* |  |
| **Career Information** | |
| Please outline your intentions on completion of your degree.  *(You may attach a separate sheet of paper if necessary)* | □ *(tick when attached)* |

|  |  |
| --- | --- |
| **References** | |
| Please provide the name, title, address, phone number and email address for your two referees: | |
| Referee 1: | Referee 2: |

|  |  |
| --- | --- |
| **Declaration:**  I declare that the information contained in and provided in connection with this application is true and correct. **I acknowledge that giving false or misleading information is a serious offence.** | |
| Signature: | Date: |

**Please submit your application to the Lincoln University Scholarships Office no later than 15 April.**

Candidates shall submit applications directly to the following addresses:

Scholarships Office Phone: (03) 423 0000

Lincoln University Email: scholarships@lincoln.ac.nz

PO Box 85084

Lincoln 7647

Christchurch Web: [www.lincoln.ac.nz/scholar](http://www.lincoln.ac.nz/scholar)

**PRIVACY PROVISIONS**

The information requested in this application form and your academic record will be used solely for the purposes of assessing your application for the Scholarship(s) for which you are applying. Personal information contained in this application will be made available to members of the Selection Committee for this award, the membership of which is detailed in the award regulations.

Lincoln University undertakes to store your application in a secure place in the event that you are successful in gaining an award or are selected as a reserve candidate for an award, and to destroy your application to preserve its confidentiality in the event that you are unsuccessful in gaining an award.

Should you have reason to believe that information held about you in either your application or your academic record is incorrect, you have the right of access to, and correction of, that information.

Personal references from the persons you have named are obtained on the strict understanding that they are confidential, and you may not have access to those reports without the written authorisation of the author.

I, ............................................................................................ agree to the above conditions with respect to my scholarship application(s) to Lincoln University.

Signed:........................................................…………... Date:.......................................................

**ADVICE TO APPLICANTS**

Applications must arrive by the date shown on the application form. No undertaking is given to accept late applications.

It is your responsibility to contact your referees, and ask them to send their references to the Scholarships Office. References should be clearly marked with your name and the name of the scholarship(s) for which you are applying. Referees should **not** be asked to send their references to you, as they must have the opportunity to be completely frank. Non receipt of referees reports or incomplete applications, may prejudice your eligibility.

If requested please do not send original birth certificates or other original documents. Send only copies that have been certified by a J.P, a solicitor, or a staff member in the university registry. Lincoln University accepts no responsibility to return original documents.

Please do not put your application into any sort of folder. Simply attach all pages with ONE staple in the top left hand corner.  **All pages should be A4 size.**

If you have any queries regarding your eligibility or how to apply, please contact the Scholarships Office on 0800 10 60 10 or scholarships@lincoln.ac.nz.

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**REFEREES REPORT**

Applicant’s Name:

Student ID Number:

Scholarship(s) Applied For:

Due Date

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**Please provide a confidential reference (ACADEMIC or PERSONAL) on or attached to this form, for the above named student. This reference will only be used by the Scholarships Selection Committee in determining the applicant’s eligibility for the scholarship.**

Please send this report to: Scholarships Office, Lincoln University, P O Box 85084, Lincoln 7647, CHRISTCHURCH.

Referee’s Name: *(Please Print)*

Organisation:

Signature: Date: