

Argyle Scholarship

APPLICATION FORM

| Student Information | | | | |
|----------------------------------|--|--|--|--|
| Family Name: | | | | |
| | | | | |
| First Name/s: | | | | |
| | | | | |
| Date of Birth: | | | | |
| | | | | |
| Postal address (include number | | | | |
| of years resident) in | | | | |
| Marlborough region: | | | | |
| Email address: | | | | |
| | | | | |
| Mobile number: | | | | |
| | | | | |
| Lincoln Student ID Number: | | | | |
| (if known) | | | | |
| | | | | |
| Acade | emic Information - Undergraduate | | | |
| Secondary School Attended: | | | | |
| (include years) | | | | |
| Highest Secondary School | | | | |
| Qualification: | | | | |
| (i.e. NCEA, UE, or similar) | | | | |
| Course of Study at Lincoln: | | | | |
| | | | | |
| | | | | |
| Academic In | formation – Postgraduate (if applicable) | | | |
| Highest qualification: | | | | |
| | | | | |
| Provide certified copies of | | | | |
| academic transcripts for all | | | | |
| tertiary qualifications not | | | | |
| undertaken at Lincoln University | | | | |
| Course of Study at Lincoln: | | | | |
| | | | | |

| Work or Practical Experience | | | | |
|---|------------------------|--|--|--|
| Please outline any work or practical experience | | | | |
| that may be relevant. | □ (tick when attached) | | | |

| Intentions on the Completion of the Course: | | |
|---|------------------------|--|
| Please outline your career intentions on | | |
| completion of your course of study. | □ (tick when attached) | |

| References | | | | | |
|--|------------|--|--|--|--|
| Please request two confidential letters of reference to be sent directly to | | | | | |
| scholarships@lincoln.ac.nz | | | | | |
| Please provide the name, title, address, phone number and email address for your two | | | | | |
| referees: | | | | | |
| Referee 1: | Referee 2: | | | | |
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| 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 30 September.

Candidates shall submit applications directly to the following addresses:

Scholarships Office

Lincoln University Email: scholarships@lincoln.ac.nz

PO Box 85084

Lincoln 7647

Christchurch Web: <u>www.lincoln.ac.nz/scholarships</u>

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.

| | agronication(s) to Lincoln Univer | above cond | litions |
|---------|-----------------------------------|------------|---------|
| 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.