

George Graham Trust Scholarship

APPLICATION FORM

	Student Information
Family Names	Student information
Family Name:	
First Name/s:	
Date of Birth:	
Postal address:	
Residential Address (if	
different from mailing	
address):	
Number of Years Resident in	
District:	
Email address:	
Mobile number:	
Lincoln Student ID Number:	
(if known)	

Academic Information		
Secondary School Attended:		
(include years)		
Highest Secondary School		
Qualification:		
(i.e. NCEA, UE, A or B bursary)		
Secondary School Qualifications	NCEA Level 2 record of learning (tick when attached)	
(please attach a copy of your		
results from year 12)		
Academic Distinctions:		
Course of Study at Lincoln:		

Constitut Astivities
Sporting Activities Please outline any sporting activities and achievements. (Include on sengrate sheet of paper if
Please outline any sporting activities and achievements. (Include on separate sheet of paper if
necessary.)
Other Organised Activities
Please outline any other organised activities you are involved with. (Include on separate sheet
of paper if necessary.)
Practical or Work Experience
Please outline any work or practical experience acquired. (Include on separate sheet of paper
if necessary.)
, necessary,
Intentions on Completion of Course
Please outline your career intentions on completion of your course of study. (Include on
separate sheet of paper if necessary.)

Refer	rences			
Please submit two confidential letters of reference with your application.				
School and employer reports are especially important.				
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 no later than 31 August.

Candidates currently at Lincoln University 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/scholarships

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.

l,	agree to the above conditions
with respect to my scholarship application(s) to I	Lincoln University.
C'a a a d	Date
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.



REFEREES REPORT

Applicant's Name:
Students ID Number:
Scholarship(s) Applied For:
This report is due by: (Date)
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 Manager, Lincoln University, P O Box 85084, Lincoln 7647, CHRISTCHURCH.
Referee's Name: (Pls Print)
Organisation:
Signature:Date: