

## **Tertiary Scholarship for Māori**

APPLICATION FORM						
	Personal Details					
	Surname:		Gender:Male	Female		
	First Names:					
	Contact Address:					
		E-mail:				
	Date of Birth:	Plac	ce of Birth:			
	Korowai Māori					
	I am a descendant of the	I am a descendant of the following Marlborough Iwi, tick <b>all</b> the boxes below that are applica				
	Ngāti Apa	Ngāti Toarangatira	Ngāti Kuia			
	Rangitāne	Ngāti Rārua	Te Ātiawa			
	Indicate your ability to co	onverse in Te Reo Māori by se	electing a tick box below:			
	Indicate your ability to co		electing a tick box below:  Medium to High	High		
	Low Low to Medi		Medium to High	High		
	Low Low to Medical Kaumatua Confirmation:	ium Medium	Medium to High	High		
	Low Low to Medical Kaumatua Confirmation:  I certify to the best of my	ium Medium  (To be certified by kaumatu	Medium to High a/pakeke) leclaration is true.			
	Low Low to Medical Kaumatua Confirmation:  I certify to the best of my	ium Medium  (To be certified by kaumatury knowledge that the above decke:	Medium to High a/pakeke) leclaration is true.			
	Low Low to Medical Kaumatua Confirmation:  I certify to the best of my Name of Kaumatua/Pake Signature:	ium Medium  (To be certified by kaumatury knowledge that the above decke:	Medium to High a/pakeke) leclaration is true.			
	Low Low to Medical Kaumatua Confirmation:  I certify to the best of my Name of Kaumatua/Pake Signature:	ium Medium  (To be certified by kaumatury knowledge that the above decke:  Pos	Medium to High a/pakeke) leclaration is true.			

## D Educational Record

Previous Institutions Attended (eg. Secondary, Tertiary, Other)	Years Attended	Qualifications/Certificates/Grades Attained

**Note:** Please attach copies of qualifications/certificates to verify the above results

## E Proposed Study for the Following Year

Tertiary Institution you Plan to Attend	Degree/Diploma/Course to be Studied	Length of Course	Subjects you will Major in	Expected Date to Complete Course	Course Costs for the Year

follow	
lf <u>no</u> , μ	olease state reason:
Comm	nunity Involvement
Outline	e your involvement in the local Marlborough community, in particular explain yo
involve	ement in the Māori community/activities.
	Please provide copies of any information to support the above involvements.
<b>Financ</b> Outline	Please provide copies of any information to support the above involvements.  cial Contributions  e any financial contributions being made by <u>you</u> to your proposed year of study s, holiday employment, part-time work).
<b>Finan</b>	cial Contributions e any financial contributions being made by <u>you</u> to your proposed year of study
Finance Outline saving	cial Contributions  e any financial contributions being made by <u>you</u> to your proposed year of study s, holiday employment, part-time work).
Outline saving	cial Contributions  e any financial contributions being made by <u>you</u> to your proposed year of study s, holiday employment, part-time work).
Outling saving:  Aspira	cial Contributions  e any financial contributions being made by <u>you</u> to your proposed year of study s, holiday employment, part-time work).
Outling Saving  Aspira On cor	cial Contributions  e any financial contributions being made by <u>you</u> to your proposed year of study s, holiday employment, part-time work).
Aspira On cor	cial Contributions  e any financial contributions being made by you to your proposed year of study s, holiday employment, part-time work).  Itions  Inpletion of your studies in which field do you intend to work?

	Please attach a personal written statement of approximately 200 words outlining why you feel you should receive this scholarship.
J	Confirmation
	I confirm that the information contained in this application is correct.
	Name: Date:
	Signature:
Note:	This application can be completed electronically, saved and emailed to: info@linesmarl.co.n To insert an electronic signature you will need Adobe Reader XI or a later version. Adobe Reader is available to download for free from www.adobe.com.
	Marlborough Lines Tertiary Scholarship for Māori Acknowledgment Slip
	ease complete the following details. This slip will be returned to you by post or u will receive an email as confirmation of receipt of your application.
Yo	ur application for the above scholarship is hereby acknowledged.
Na	ame:
Ac	ldress:

**Personal Statement**