

**Masterton District Council Scholarship 2017
Application Form**

Full Name:

Date of Birth: **Male / Female**(please circle one)

Residential Address:

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Telephone Home: **Work:** **Mobile:**

Student ID:

A: Please complete the following sections 1 to 3:

1 Please name the programme you have enrolled in and been accepted onto for 2016 at UCOL Wairarapa.

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2 Have you applied for or received any other funding to assist you in your studies?

Yes/No If 'Yes' please give details:

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3 Why do you think you deserve this scholarship and how will you use it?

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B: Please attach the following:

- 1 Evidence that you live in the Masterton District Council area.**
- 2 An up-to-date C.V.**
- 3 Two referees supporting your application.**

I certify that the above particulars and information provided are correct.

Signature Date

Return completed application form no later than 4pm Wednesday 1st March 2017 to:

**UCOL Wairarapa
143-159 Chapel Street
P O Box 698
Masterton 5840**