

Allan Beaumont Student Award

Application Form

A. PERSONAL INFORMATION

Name in full:

Contact address:

Telephone No. Male/Female: Date of birth:

Name of programme you intend studying in **2023**:

Length of time you have lived on the West Coast?

B. APPLICANT INFORMATION

Please complete each part of this section and ensure that sufficient detail is recorded for the selection committee to evaluate the application.

1. Have you applied for or received any other financial award/assistance towards your programme of study / enrolment at TPP? If yes, please supply details.

2. What attracted you to apply for a programme of study at Tai Poutini Polytechnic?

3. What do you feel you will gain from successful completion of this programme?

4. Briefly outline your reasons for applying for this scholarship?

5. Please give the reasons you feel that make you an appropriate recipient of this award.

C. REFEREE

Please give the name, address and contact telephone number of the referee you have asked to support your application.

Name:

Address:

Telephone No.

When you have completed your application, you should forward it to your referee requesting him/her to complete the referee's form and then forward the completed application to Tai Poutini Polytechnic.

D. DECLARATION

I, _____, hereby declare that the information provided in this application is true and correct. If I am successful in gaining a Scholarship, I consent to having my name and photograph published.

Signature: _____

Date: _____

Witness (please print): _____

Witness' Signature: _____

E. RETURN OF FORM

This completed form should be returned to:

Executive Assistant
 Tai Poutini Polytechnic
 Private Bag 607
 GREYMOUTH 7840
 Email - ceoffice@tpp.ac.nz

by 15 December 2022. *Do not send any other personal documentation.*

The successful applicant(s) for this Award will be informed as soon as possible after the selection committee's decision is known. It is a condition of award that the name(s) of the recipient(s) is printed in West Coast newspapers.

[Referee's Form follows]

F. REFEREE'S FORM

Full name of applicant:

Full name of referee:

Relationship to applicant:

Please **tick one** of the following three alternatives:

I have sighted the applicant's application form and agree with the information supplied.

I have sighted the applicant's application form and agree with the information supplied **except for the following:** _____

I do not wish to support this application.

Signed referee:

Witness name (please print):

Signed witness:

Date:
