

 **siwaimea@siswp.org**

**SOROPTIMIST INTERNATIONAL OF WAIMEA**

Soroptimist International of Waimea is an organisation which works towards advancing the welfare and status of women. It is part of the Soroptimist Mission to increase access to education. An **Education Grant** **of $3000** is available to a selected woman aged 25 years of age or over and residing in the Nelson/Tasman area while undertaking full-time tertiary study. The Grant is not applicable to post-graduate students.

Applicants must be New Zealand citizens or have been granted permanent residence.

**TO APPLY**: complete all three pages of this Education Grant Application Form and, having read and agreed to the conditions of the Grant, sign the form. Email the form to the Secretary: siwaimea@siswp.org

**CLOSING DATE for applications: 09 FEBRUARY 2022.** Late applications will not be considered. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E**DUCATION GRANT APPLICATION FORM

**Family name**: ……………………………. **First name** …………………………….

**Year of Birth**: ……………………………… **email**:…………………………………….

**Address:**……………………………………………………………………………………

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**Telephone:** Landline**:.** ………………………… Mobile:…………………………. ……

**Highest educational qualification:** ……………………………………………………………………………………………….

**Referees:- Name, phone number (mobile preferred) and email address of two people (not family) who may be contacted to recommend you for this Grant:**

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**Title of the course you are undertaking in 2022 and the name of the tertiary institution you are enrolled in.**

Course…………………………………………………………………………………………..

Institution……………………………………………………………………………………….

**How will your proposed study enhance your future career goals?**

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**Why, do you think, you would be a worthy Grant recipient?**

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**If you were successful in your application, how would the Education Grant assist you?**

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**How did you learn about this Education Grant?**

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**Additional Information or Comments you may wish to include (if applicable):**

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 **Conditions of the Grant:**

 As an applicant for the Educational Grant I agree: -

* If shortlisted, to attend a Selection Interview in February and bring photo ID (e.g. passport or Drivers' Licence) and evidence of enrolment in a tertiary institution in 2022 and payment of tuition fees.
* that those named as referees in this application may be contacted by a member of the selection panel.
* if awarded a grant, to attend at least one meeting of Soroptimist International Waimea in 2022 and report twice a year to the Club.
* if awarded a grant, to allow my name and photograph to be used by SI Waimea for publicity associated with the Grant.
* if awarded a Grant, to provide details to enable the funds to be deposited in my bank.

**Signature of applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Notes:

* Applications will be acknowledged by the Secretary on receipt
* The Selection Panel will meet within 7 days of the Closing Date and all applicants will be advised of the outcome shortly afterwards.

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