

**INFORMATION FOR APPLICANTS**

**For Office Use:**

- Read the criteria for the Scholarship you wish to apply for carefully. If you do not meet all criteria, contact the Scholarships Office for advice.
- Make sure you **check the closing date** and that you have allowed plenty of time to forward all completed sections of the application.
- If you have not already supplied a certified copy of your identify documents as part of an enrolment at AUT you must include these with your application, i.e., Birth Certificate or Passport.
- Please carefully **read and sign the declaration** on page two of this form.
- **Please send your completed application to the Scholarships Office; contact details listed below.**

**Which Scholarship are you applying for**

**School of Art & Design PhD Scholarship**

**Contact Details**

<p><b>AUT Student ID</b> (if known) _____</p> <p><b>First Name</b> _____</p> <p><b>Last Name</b> _____</p> <p><b>Address</b> _____ _____ _____</p> <p><b>Telephone</b> _____</p> <p><b>Mobile</b> _____</p>	<p><b>Date of Birth</b> _____</p> <p><b>Gender</b>      <input type="checkbox"/> Female      <input type="checkbox"/> Male</p> <p><b>Citizenship</b>      <input type="checkbox"/> NZ Permanent Resident or NZ Citizen</p> <p>                                 <input type="checkbox"/> Other (specify) _____</p> <p><b>Ethnicity</b> _____</p> <p><b>Iwi</b> (if applicable) _____</p> <p>_____</p> <p>_____</p> <p><b>Fax</b> _____</p> <p><b>Email</b> _____</p>
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**Referees Details:** If required please supply the names and contact details of two people who could act as a referee for your application. Please ensure your referees send in a written reference before the scholarship closing date.

<p><b>Name:</b> _____</p> <p><b>Address:</b> _____ _____ _____ _____ _____</p> <p><b>Telephone:</b> _____</p> <p><b>E-Mail:</b> _____</p> <p><b>Fax:</b> _____</p>	<p><b>Name:</b> _____</p> <p><b>Address:</b> _____ _____ _____ _____ _____</p> <p><b>Telephone:</b> _____</p> <p><b>E-Mail:</b> _____</p> <p><b>Fax:</b> _____</p>
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## Qualifications

Please attach a certified copy of your results (if available) otherwise make arrangements to have them forwarded directly to the Scholarships Office (please note where they will be sent from):

Institution	Qualification	Year Attained

## Prizes and Awards

(Please list any academic or professional prizes, awards or scholarships you have received in the last 5 years:)

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## Attachments

- Completed D1
- Statement of potential for other sources of funding to support the PhD

## Personal Information and the Privacy Act

- The personal information you provide in your scholarship application is protected by AUT's policies and the Information Privacy Principles.
- The information will only be used to determine whether or not you will receive the scholarship. It will only be disclosed to a small group of staff and others who have responsibility for making decisions about scholarships.
- A record of your application will be held in the Scholarships Office and recorded in a secured scholarships module of the University database.
- You have the right of access to all personal information AUT holds about you unless there is a statutory reason for withholding it. Some information provided by referees may be kept confidential as "evaluative opinion" unless written permission from the author is received.

## Declaration

- I have read and accepted the Terms of Reference for the Auckland University of Technology Art & Design Scholarship I have applied for.
- I authorise the University to disclose to the Scholarships Office details about my academic progress to confirm that during the period I receive my Scholarship I continue to satisfy the criteria.
- I declare that I have prepared the material presented in this application.
- The information I have provided in my application is a true and complete record of my circumstances and I acknowledge that AUT may cancel my Scholarship if I have supplied false information.
- I agree to be included in any promotional activities that AUT wish to run in conjunction with the awarding of this Scholarship.

**Applicant's signature:** .....

**Date:** .....

## For Office Use

Please check that you have supplied all application requirements

Supporting Documents:	<input type="checkbox"/>	List:	<input type="checkbox"/>	Date sent:	_____
Residency Checked:	<input type="checkbox"/>	Acknowledgement:	<input type="checkbox"/>	Date sent:	_____
Academic Evidence:	<input type="checkbox"/>	Sent to Selection Panel:	<input type="checkbox"/>	Date sent:	_____
Entry on Database:	<input type="checkbox"/>	Notification:	<input type="checkbox"/>	Date sent:	_____