

**AUT BUSINESS SCHOOL
ONEHUNGA HIGH BUSINESS SCHOOL
SCHOLARSHIP APPLICATION FORM**



Information for Applicants

- You should have received a separate information sheet outlining the Terms of Reference for the scholarship you have been nominated for.
- Please read the criteria and conditions for this scholarship carefully.
- Please check the application requirements and ensure that you submit all necessary forms and information.
- Please make sure you have checked the closing date and that you have allowed plenty of time to forward all sections.
- Please read and sign the declaration on page two of this form.
- Please ensure you submit an Application For Enrolment (AFE).
- Please send your completed application to the AUT Scholarships Office; contact details below.

For Office Use:

Student ID: _____

OHBS APPLICANT CATEGORIES

- GENERAL SCHOLARSHIP**
- MAORI SCHOLARSHIP**
- PASIFIKA SCHOLARSHIP**

Applicant's Contact Details

First Name: _____

Date of Birth: _____

Last Name: _____

Gender: Female Male

Address: _____

Citizenship: NZ Citizen or Permanent Resident

Ethnicity: _____

Iwi: (if applicable) _____

Pacific Island Ethnicity: (if applicable) _____

Telephone: _____

Mobile: _____

Email: _____

Onehunga High Business School Details (to be completed by School):

Name of Person Authorising Nomination: _____

Designation: _____

Telephone: _____ E-Mail: _____

Signature: _____ Date: _____

Please attach a letter of endorsement, including a summary of the applicant's academic results in the current and preceding year.

Secondary School / Study Details

What years have you been enrolled at the Onehunga High Business School? From _____ To _____

What qualifications have you gained? _____

What qualification are you currently undertaking? _____

What subjects are you taking for that qualification? _____

Provide a brief background about yourself and your accomplishments at Secondary School or in the wider community (use a separate sheet of paper if necessary):

Do you live with the effects of long-term illness, injury, disability or are you Deaf?

YES NO

If **yes**, please contact the Disability Resource Service to discuss your study requirements.

disability.office@aut.ac.nz or 09-921-9999 ext 8262

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 ARION 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 (please tick)

- I have read and accepted the Terms of Reference for the AUT 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 agree to the criteria with respect to my application for a Onehunga High Business School Scholarship, administered through the Scholarships Office at AUT.
- 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.

Signature: _____

Date: _____