

BUSINESS POSTGRADUATE ACADEMIC EXCELLENCE 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: _____

WHICH PROGRAMME ARE YOU APPLYING FOR?

B BUS (HONS) MASTER OF BUSINESS

Applicant's Contact Details

First Name:	_____	Date of Birth:	_____
Last Name:	_____	Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male
Address:	_____ _____ _____	Citizenship:	<input type="checkbox"/> NZ Citizen or Permanent Resident
		Ethnicity:	_____
		IWi: (if applicable)	_____
Telephone:	_____	Fax:	_____
Mobile:	_____	Email:	_____

Please attach your signed official academic transcript from your undergraduate business or commerce degree.

Previous Study Details

Which Tertiary Institution did you attend?

What years were you enrolled there?

From

To

What qualifications have you gained?

List any scholarships or awards you may have received in the past:

Use a separate sheet of paper if necessary

Date	Award

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 Business Postgraduate Academic Excellence 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: _____