Exceptional Circumstances Awards

**Application Form**

**Full Name** *(Block letters)***:** ……………………………………………………………….

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

**Contact Phone No:** ……………..……… **Email:** …………………………………….

**Place & Date of Birth:** …………………………………………………………………

**Citizenship** *(Enclose proof of NZ citizenship such as certified copy of passport or birth certificate)*

**Names & Email addresses of referees you have asked to provide a reference.** These references must be emailed separately (trust@graduatewomencanterbury.nz) by the referee prior to the closing date.

Academic Referee Name: ……………………………………………………………………………………

Email:

……………………………………………………………………………………

Special Circumstances Referee Name: ……………………………………………………………………………………

Email:

……………………………………………………………………………………

**Academic and Study Details:**

**Completed tertiary study and institution where qualification(s) obtained:** ……………………………………………………………………………………

**or NCEA (or equivalent) qualifications completed**………………………………

*Please enclose certified copy of academic record. An uncertified copy will not be accepted.*

**Proposed Course of Study:**

*On a separate page provide an outline (at least 750 words) of your intended course of study, including your reasons for choosing it and how it fits into your possible future plans. Outline how this award could help you to successfully advance your plans and fulfil your potential. Specify the dollar amount you are seeking.*

**Privacy Act**

The information in this application will be used solely for the purpose of assessing your application for this award. Personal information contained in this application will be made available only to members of the selection committee. The references will be considered confidential to this application and will not be released to the student without the written authorisation of the referees. The references must be sent directly to the Trust by the Referees.

**Future Contact:**

I agree to be contacted by representatives of Graduate Women Canterbury.

**Declaration**

I, …………………………………………………………(signature), agree, that by emailing this application, I accept all conditions in respect to my application including the provisions of the Privacy Act as stated above. I have read and understood the regulations and agree to abide by them. Should my application be successful I agree to the publication of my image, name and course of study as a recipient of the award.

**PLEASE NOTE: Any application which does not contain ALL the requested information and documentation will not be considered.**

**Checklist**

1. Completed application form.  
2. Proof of NZ citizenship.

3. Certified copy of academic record(s).

4. Proposed course of study statement.

5. Made requests to nominated referees for the references to be emailed separately prior to

the closing date. *It is your responsibility to check that these references have been supplied prior to the closing date.*

6. Signed Declaration.

**Applications are open through the year and should be emailed to:** [trust@graduatewomencanterbury.nz](mailto:trust@graduatewomencanterbury.nz)