



UCOL : Palmerston North

# UCOL SCHOLARSHIP

## FOR EFFORT AND ACHIEVEMENT

### About the scholarship

The annual award is for \$1000.

In making the award the applicant's personal history, achievement and effort will be taken into consideration. This does not necessarily mean that the candidate will be an "A" student, as consideration will be given to the applicant's previous history and the effort that has been put into this particular course.

The award may be made to one student, or divided in any way determined by the Selection Committee. All sections of the application are to be completed.

Application forms are available online, at Hub Central, UCOL, Palmerston North, and can be sent to you by email from [ScholarshipPN@ucol.ac.nz](mailto:ScholarshipPN@ucol.ac.nz).

### Deadline

Applications close the first Friday in September each year.

### Criteria

- Applicants must be enrolled in and attending a course at UCOL, with preference given to full time study.

### What to do

- Complete the attached application form and budget sheet
- Either hand in your applications at the Student Resource Centre
- Or addressed to:

Student Resource Centre  
UCOL  
PB 11022  
PALMERSTON NORTH  
Attention: Scholarship Administrator



Call 0800 GO UCOL  
0800 46 8265

APPLY ONLINE  
[www.ucol.ac.nz](http://www.ucol.ac.nz)  
TXT 3388

## Application Form

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### Personal details

Tick one:       Ms       Miss  
                     Mrs       Mr

Surname: \_\_\_\_\_

\_\_\_\_\_

First Names: \_\_\_\_\_

\_\_\_\_\_

Age (optional): \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Telephone: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Course enrolled in: \_\_\_\_\_

\_\_\_\_\_

Tick one:       Full time       Part Time

*Please continue your application details on a separate sheet of paper if necessary.*

### Declaration

- I am meeting all course requirements and assessment requirements
- All information provided is true and correct

I give permission for this information to be used for the purpose of this Award. UCOL guarantees the information will not be used for other purposes.

### Documents to supply

Please tick the boxes below to indicate you have completed, and submitted all required documents.

- Two written references
  - One for academic progress
  - A character reference
- A transcript of your results
- Proof of New Zealand citizenship
- A brief description of why you believe you should receive this scholarship including:
  - A brief description of yourself
  - Your progress to date on your current course
  - Your educational background, work history, and community interests
  - Any future academic or employment plans you may have
- In which degree course are you enrolled? Is it full-time or part-time? What personal academic goals have you achieved?
- Completed budget form
- Information about any other scholarship you are receiving.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Thank you for submitting this application. You will be notified as soon as the final selection has been confirmed.

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## Estimated Income and Expenditure

Candidate's name: \_\_\_\_\_

**Income**

Annual

Monthly

Weekly

	Annual	Monthly	Weekly
Student Allowance	\$	\$	\$
Loan Living Costs	\$	\$	\$
Benefit	\$	\$	\$
ACC	\$	\$	\$
Partners Income	\$	\$	\$
Salary/Wages	\$	\$	\$
Family/Child Support	\$	\$	\$
<b>Total Weekly Income</b>			\$

**Expenditure**

Annual

Monthly

Weekly

	Annual	Monthly	Weekly
Food & House Keeping	\$	\$	\$
Gas/Power	\$	\$	\$
Phone	\$	\$	\$
Rent/Board/Mortgage/Rages	\$	\$	\$
Insurance (home/contents/car)	\$	\$	\$
Study Related expenses (books, materials)	\$	\$	\$
Personal expenses (clothing, leisure)	\$	\$	\$
Petrol/Fares	\$	\$	\$
Vehicle Maintenance/Registration	\$	\$	\$
Childcare/Child support	\$	\$	\$
<b>Total Weekly Costs</b>			\$

Total Weekly Income			\$
minus (-) Total Weekly Costs			\$

To change annual costs to weekly costs divide (÷) by 52

To change monthly costs to weekly costs multiply (x) by 12 then divide (÷) by 12

To change fortnightly costs to weekly costs divide (÷) by 2