

**Rotary Club of South Wairarapa**

**Bill Fetch**

**Martinborough Fair Bursary**

**Declaration Pursuant to the Privacy Act**

I.....being an applicant for the Bill Fetch Martinborough Fair Bursary, hereby authorise the Rotary Club of South Wairarapa to:

1. Contact by telephone, facsimile or letter, the referees I have included in my application.
2. Discuss my academic record and family financial circumstances with staff from Kuranui College or Te Kura (The Correspondence School) as appropriate. I agree, if requested, to provide copies of income tax assessments or other documentary records relating to my parents or caregiver's income and, if applicable, any Trust or Estate from which my family or caregivers receives or is entitled to receive income.
3. If my application for a bursary is successful, to publish my name, photograph, and proposed study course, together with the amount of the bursary I have received from the Bill Fetch Martinborough Fair Bursary at the commencement of the bursary year, and to publish my name, photograph, and study results together with the bursary details at the conclusion of the bursary year.

Signed .....

Date .....

## APPLICATION FORM

*If there is insufficient space to answer any of the questions please include additional information on a separate sheet*

Surname: ..... First names .....

Preferred name ..... Gender Male / Female

Date of birth .....

Address .....

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Home phone number ..... Mobile .....

Email address: .....

Secondary school attended ..... from ..... to.....

Previous schools attended.....

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Academic qualifications (attach reports) .....

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Sporting interests .....

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Other interests .....

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Your ambitions: .....

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State your reasons for applying for this bursary: .....

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Have you applied for or received any other bursary?                      Yes / No

Are you intending to apply for any other scholarships or bursaries?    Yes / No

Please provide details of other scholarships, bursaries, prizes, awards or grants you are entitled to or anticipate receiving

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Financial assessment

- a) Proposed course and place of study .....
- b) Course fees .....
- c) Other costs.....
- d) Accommodation
  - a. type.....                      b. estimated cost.....
- e) How many other full-time students in your family aged between 16 – 24? .....
- f) How many dependent children living at home and their ages .....
- g) Combined income of parents or caregivers .....
- h) Are you be entitled to a student allowance? .....
- i) Are you entitled to an Independent Circumstances Allowance? .....

Other relevant information which may assist the panel (especially in relation to the criteria clause)

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Referees (Not relatives or schoolteachers)

Name ..... Name .....

Address ..... Address .....

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Phone number ..... Phone number .....

I acknowledge that:

- I have read and understand the conditions of the Bill Fetch Martinborough Fair Bursary
- If awarded the bursary I will abide by the terms and conditions
- All information given in this application is true and correct

Signed ..... Date .....