



# Lincoln University T poi Scholarship

## APPLICATION FORM

Student Information	
Family Name:	
First Name/s:	
Date of Birth:	
Postal address:	
Email address:	
Mobile number:	
Lincoln Student ID Number: <i>(if known)</i>	

Academic Information	
Secondary School Attended: <i>(include years)</i>	
Academic Distinctions:	
Course of Study at Lincoln:	
Please attach copies of your most recent academic results to date.	Tick when attached
Are you of NZ M ori Descent?	Yes                  No
Please list your Iwi.	
Please list your Hapu.	
Please list your Marae.	

**Leadership Information**

Please attach a written presentation outlining your leadership activities including any involvement in the Mori community.	Tick when attached
--	--------------------

**Financial Information**

Please indicate your intended means of financial support. Mark all boxes that apply.	Student Allowance Parental support (Please give details)	Student Loan Part-time employment	Other
--	--	--------------------------------------	-------

**References**

Please submit two confidential letters of reference with your application. Referees must be able to comment on your link to your ition. erit k( )-4(t)-4(eh)14( )-4(r)-3(o)13(f)-4ferxes trtuer7(nk

## PRIVACY PROVISIONS