

# James (Senior) & Mary Garcia Scholarship - 2024

## Form Preview

### Applicants Personal Details

\* indicates a required field

#### Applicant \*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Applicant Primary Address \*

Address

  

Suburb    Town/ City    Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be a New Zealand postcode.

#### Applicant Primary Phone Number \*

#### Applicant Primary Email \*

Must be an email address.

#### Date of Birth \*

Must be a date.

Upload certified copy of your Birth Certificate or Passport

\*

Attach a file:

Please provide a copy of your birth certificate or passport. A certified copy is a photocopy that has been stamped or endorsed by a person who confirms that the copy is a true copy of the original document. This person could be one of the following:

- Justice of the Peace
- Solicitor of the High Court
- Notary Public (there may be a cost)
- Deputy Registrar at a court (not all courts will be able to certify copies)
- Trustee from a Public Trust office

### Parent(s)/Caregiver(s) Details

\* indicates a required field

# James (Senior) & Mary Garcia Scholarship - 2024

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## Parent/Caregiver 1

\*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Occupation \***

**Address \***

Address

  

**Email \***

Must be an email address.

## Parent/Caregiver 2

**Name \***

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Occupation \***

**Address \***

Address

  

**Email \***

Must be an email address.

## Education, Academic and Career Information

\* indicates a required field

**Please provide an overview of your most recent academic results \***

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### Year 13 Mid-year report \*

Attach a file:

### Please provide an overview of any qualifications you currently hold \*

Proposed Course of Study

### Please provide details of the qualification you propose studying towards \*

### Length of Degree \*

## The James (Senior) & Mary Garcia Scholarship

\* indicates a required field

Scholarship

### What type of Scholarship are you applying for? \*

- ☐ Music
- ☐ Journalism

### Please provide an overview of any Music or Journalism experience you have \*

### Did you attend Westown Primary School? \*

- ☐ Yes
- ☐ No

### If so what years did you attend Westown Primary School? \*

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### Study and Career information

**Why are you a good candidate for this Scholarship and how do you fit the purpose of the Trust and criteria? \***

**Please tell us 'Why you are doing your chosen course of Study?, What is your intended Career and 'What you would like to achieve with your qualification and in your career.'. \***

### Financial Information

\* indicates a required field

#### Grants & Scholarships

**Please provide details of any other grants or scholarships held or applied for including the value \***

#### Parent / Caregiver Earnings (compulsory)

This information will be used for the sole purpose of assessing financial need and is kept confidential to the Committee only.

**Main Income Earner Before Tax (per year) \***

Must be a number.

**Main Income Earner After Tax (per year) \***

Must be a number.

**Second Income Earner Before Tax (per year)**

Must be a number.

**Second Income Earner After Tax (per year)**

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Must be a number.

**Any other Family income including Accommodation supplements, Trust Income, Self employed Income or Subsidies etc**

Must be a number.

**Confirmation of Income (Payslip, Salary confirmation or IRD Statement etc)**

Attach a file:

**Brief financial background of family: \***

**Please provide details of your expected living arrangements while studying? \***

## Financial Details for 2025

Please provide an overview on your weekly sources of income and expected expenses in relation to your [year - optional] eg. 2025 study year.

**Income includes**, scholarships, student allowance, wages/salary and any other income.

**Expenses includes**, educational course fees, accommodation and stationery and any other expenditure.

Income	\$	Expenditure	\$
		This includes living expenses such as Rent, Food, and Travel.	
	\$	Rent/Accommodation	\$
	\$	Food (estimate)	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

## Use of Scholarship Funds

**How do you propose to use The James (Senior) & Mary Garcia Scholarship funds? \***

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Please break down per year amount requested if wishing to apply for multiple years.

## Supporting Documents

\* indicates a required field

Please upload the following documents to support your application:

**Cover Letter** - including a brief description of your background, details of education, interests, achievements etc (1/2 to 1 full page long)

**Reference** - Please provide at least one written reference/s (from school Principal, Dean, Music teacher or employer etc.)

### **Cover Letter \***

Attach a file:

### **Reference \***

Attach a file:

## Submitting your application

\* indicates a required field

Before submitting this application to Public Trust:

Please ensure you have reviewed your application and completed all the questions.

**Please note that if you do not provide all the information requested this may affect the outcome of your application.**

## Declaration & Privacy Statement

In submitting this application form I acknowledge I have read the attached information sheet and accept any terms and conditions stated.

I agree that I will contact Public Trust Charities Team immediately if any information provided in this application changes or is incorrect.

For the purposes of the Privacy Act 2020:

- I acknowledge that the information contained in this application is stored in the SmartyGrants database and will be held by Public Trust for the purpose of assessing my application to the James (Senior) & Mary Garcia Scholarship and/or any other conjoint Trust/s.

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- I understand the information may be made available to other parties such as Committee Members in the course of enquiries regarding applications or in publishing the results of scholarships awarded, and third-party suppliers for related purposes.
- I acknowledge that if I do not provide all of the information requested, Public Trust may not be able to assess my application.
- I give consent for Public Trust to hold this information for no longer than is required in order to assess my application and to meet their legal requirements.
- I understand I have the right of access to, and correction of, the personal information held about me.

**I have read and understood the declaration and privacy statement. \***

☐ Yes

**Full Name \***

**Date \***

Must be a date.