

Public Trust Scholarships 2024

Form Preview

Applicant Details

* indicates a required field

Scholarship Selection *

- The Louisa Roper Scholarship
- The Rolfes' Scholarship

No more than 1 choice may be selected.

If you are applying for more than one Scholarship, you will need to complete a full application for each.

Applicant *

Title First Name Last Name

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Applicant Primary Address *

Address

Suburb Town/
City Postcode

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Must be a New Zealand postcode.

Applicant Primary Phone Number *

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Applicant Primary Email *

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Must be an email address.

Date of Birth *

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Must be a date.

Birth Certificate or Passport

Please upload a certified copy of your Birth Certificate, Passport or Citizenship

*

Attach a file:

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Parent(s)/Caregiver(s) Details

* Must complete this section if you are under the age of 18.

Parent/Caregiver 1

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

Occupation:

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.

Parent/Caregiver 2

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

Occupation:

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.

Number of Dependents on parents/guardians

Must be a number.

Personal, Academic and Study/Career

* indicates a required field

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Academic, Study and Career Information

Why do you apply for this Scholarship and how do you see yourself fit the purpose of this Scholarship? *

- You need to demonstrate you are the ideal candidate for this scholarship.

Academic - Please provide a list of your education to date including Schools attended and periods, and any other academic qualifications *

Proposed Course of Study - Please provide details of the qualification you propose studying towards *

Future Career - Please provide a brief summary of your career aspirations *

- Your career aspirations aligns with to your chosen study field would be advantageous.

Supporting Documents

Please upload the following documents to support your application:

Reference - Please provide reference/s from your Principal or Dean and current employer if applicable

Additional information - This is an opportunity for you to provide information in your own words in addition to what you have outlined in the application

Others - any other support information such as academic and/or extracurricular achievements, community involvements etc.

Reference *

Attach a file:

- For the Louisa Roper Scholarship please upload confirmation of your attendance at Avonside Girls High School, Papanui High School or Ashburton College during any part of your final year of secondary education. * For Rolfes Scholarship please upload confirmation of your overseas study and travel information associated with the study.

Additional Information

Attach a file:

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Others

Attach a file:

- Your academic achievements, or confirmation of university enrolment or supporting letter.

Financial Information

* indicates a required field

Your Financial Position

Your Income or Financial Support available to you *

This can be your part time or self employed income, government subsidies, monetary gifts, trust fund for education etc. Enter 0 if inapplicable.

Please list any other grants or scholarships held or applied for in relation to your study in 2025 *

Enter 0 if inapplicable

Parent / Caregiver Earnings (compulsory for applicants under the age of 18)

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)

Must be a number.

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Course Financial Details

Expected income and expenses (estimated is sufficient) in which course is to be financed from the 1st of January 2025 - 31st of December 2025

Bursaries and Scholarships

\$

Must be a dollar amount.

Student/Independent Allowance

\$

Must be a dollar amount.

Cash/Savings held

\$

Must be a dollar amount.

Expected Salary/Wages

\$

Must be a dollar amount.

Other Income

\$

Must be a dollar amount.

University/Course Fees

\$

Must be a dollar amount.

Accommodation Expenses

\$

Must be a dollar amount.

Books, Stationary etc Expenses

\$

Must be a dollar amount.

Travel Expenses

\$

Must be a dollar amount.

Other Expenditure

\$

Must be a dollar amount.

Living Arrangements

Please state your intended living arrangements while studying in 2025 *

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Scholarship funds uses

How do you propose to use the scholarship funds if you are successful? *

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

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 above selected Trust and any other conjoint Trusts.
- I understand the information may be made available to other parties such as Trust 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 *

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Date *

Must be a date.