

**Elwin Welsh Memorial SCHOLARSHIP**

**SCHOLARSHIP APPLICATION FORM**

**APPLICANT INFORMATION**

**Full Name**

**Date of Birth**

**Gender**

adadad

Male

Female

|  |
| --- |
| POSTCODE |

**Residential Address**

**Contact Phone**

Home

Mobile

Work

**Student ID**

# PLEASE COMPLETE THE FOLLOWING SECTIONS

**1. Please explain why you have chosen to enrol in Te Kura Tapere; Certificate in Introductory Conservation**

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# PLEASE ATTACH THE FOLLOWING

1. **Two referees supporting your application.**

# DISCLAIMER AND SIGNATURE

I certify that the above particulars and information provided are correct.

**Signature of applicant Date**

Return completed application form to:

**Pūkaha Mount Bruce Board**

P O Box 680

Masterton 5840
or careers@pukaha.org.nz

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