## THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

MASTER’S DEGREE AWARDS

**PURPOSE**

To assist women graduates to carry out full-time study for a Master’s Degree at an approved Institute in the Auckland region. The awards will be made for a year of study that includes either coursework and/or a research component.

**REGULATIONS**

1. Up to eight Master’s Degree Awards of $8,000 will be available for offer annually.

**Closing date: 30 January 2024.**

2. Applicants for a Master’s Degree Award must be:

1. women;
2. New Zealand Citizens or **Permanent** Residents;
3. enrolled or preparing to enrol full time\* for a Master’s Degree at an approved institute in the Auckland region.

3. In making these awards, the selection committee shall give consideration to:

* 1. applicant’s academic record;
  2. applicant’s referees’ reports;
  3. applicant’s need for financial assistance;
  4. applicant’s aspirations for the future;
  5. any special circumstances e.g. family responsibilities, personal disability, considered relevant.

4. Each applicant for these awards must submit her application **on the current prescribed application form**, together with:

1. a certified copy or statutory declaration of her academic record (this can be in the form of a certified digital document from the tertiary institution);
2. a certified copy of evidence of status as a New Zealand Citizen or **Permanent** Resident;
3. confirmation that confidential references have been sought from two referees.

**“Certified copy” means a copy of the original, certified as true by an appropriate authority (for example, Academic Registrar, Head of Department, Study Supervisor, or Justice of the Peace).**

**A “Statutory declaration” must be made before a Justice of the Peace or Solicitor on the appropriate form.**

5. These awards may not be held concurrently with an award or grant of equal or higher value. This includes sponsored or paid study leave.

6. The Master’s Degree Awards shall be paid in one instalment on presentation of proof of enrolment as a full time Master’s Degree, for example a copy of the receipted fees invoice or certification from the relevant department.

7. A successful applicant is required to complete her year of study and to make a brief report at the end of this study. Failure to complete two full consecutive semesters will require refund of the full value of the award.

\*This scholarship is intended for students studying full-time towards a qualification. The Trustees understand that personal circumstances such as health conditions or impairments can limit a person’s ability to study full-time. Applications from students studying part-time due to disability will be therefore considered, but the applicant must include documentation supporting their reason for studying part-time. Examples of supporting documents include a letter of support from a disability service provider, the Students with Disabilities office, or your general practitioner. Students studying part-time due to disability who are successful in their application will be paid a pro-rata amount. For the purposes of this Award, a disability refers to both visible and invisible impairments including: blind and low vision, deaf and hearing impaired, head injury, ongoing medical conditions, diagnosed mental health conditions, physical/mobility impairments, speech impairments, Autism Spectrum Disorder, specific learning disabilities (e.g. dyslexia, dyspraxia, dyscalculia).

**APPLICATIONS AND ENQUIRIES**

Application Forms for the Awards are available from: <https://www.academicdresshire.co.nz/Academic+Awards+Available/Postgraduate+Awards.html>

Enquiries to:[awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz)

Please send your completed application by:

Email attachment plus scanned copies of 4 a) and b) above to: [awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz)

All applications will receive an email confirming that the application has been received. If you do not receive an email, please contact the Awards Coordinator at [awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz)

**Closing date: 30 January 2024.**

THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

MASTER’S DEGREE AWARDS

Application Form

All information provided is confidential

1. PERSONAL DETAILS

Name: Click here to enter text.

Student ID number: Click here to enter text. Mobile: Click here to enter text.

Email: Click here to enter text.

Address: Click here to enter text.

Date of Birth: Click here to enter text.

Ethnicity(optional): Click here to enter text.

Will you be a full-time student this year? Choose an item.

Are you a New Zealand citizen? Choose an item.

Are you a **Permanent** Resident of New Zealand? Choose an item.

**Please supply a certified copy of evidence of your citizenship status: a birth certificate, citizenship certificate or relevant passport pages (e.g. if you are a Permanent Resident, you must supply a copy of your Permanent Resident Visa). If you are offered an award, you will be required to prove that you are enrolled as a full-time student for the duration of the award.**

1. ACADEMIC GOALS

What is the name of the Master’s degree you are enrolled in this year? Click here to enter the name of your qualification.

What is your major? Click here to enter your major

Where are you studying? Click here to enter the name of the tertiary institute where you are studying.

Outline your proposed course of study for this degree (papers titles, research topics): Click here to enter outline in no more than 300 words.

What is your expected date of completion of this degree? Click here to enter a date.

Please provide details about any other scholarships, bursaries, or awards you currently hold, including paid study leave. Click here to list/outline other awards you have been given.

**Please attach a certified copy of your up-to-date official transcript, or your up-to-date unofficial transcript accompanied by a statutory declaration.**

1. FINANCIAL CIRCUMSTANCES

What sources of income/funding do you have or hope to have to assist you in funding your studies?(e.g. income support, student allowance, student loan, partner, paid employment, other awards or scholarships etc.)

Click here and write up to 300 words.

Please note any special circumstances (family, personal, or financial) that could be considered as part of your application. These could include number and ages of children, parenting status, health/disability status, your debt situation:

Click here and write up to 300 words.

1. PERSONAL STATEMENT

Briefly explain why you have chosen to do a Master’s degree and describe the work you plan to undertake once you have completed your course of study:

Click here and write up to 500 words.

1. REFERENCES

You need to ask two members of academic staff to provide a confidential email reference using the form on the next page. Enter the details of the academic staff members here:

|  |  |
| --- | --- |
| Name  Click here to enter the first referee’s full name, and their title. | Email address  Click here to enter text. |
| Name  Click here to enter the second referee’s full name, and their title. | Email address  Click here to enter text. |

FINAL CHECK

Please check each statement to confirm you have met all requirements:

|  |  |
| --- | --- |
| I have read the purpose and regulations of the award |  |
| I am a full-time student |  |
| I have given full details in every section |  |
| I have enclosed all the supporting documents required, including a certified copy of proof of my Permanent residency or citizenship status, and **either** a certified copy of my official transcript **or** my downloaded unofficial transcript accompanied by a statutory declaration |  |
| I have asked one referee to email a confidential report |  |

(N.B. A Statutory Declaration is available at the end of this application form.)

**The Selection Panel will NOT consider applications that do not contain the required information.**

Please keep a copy of your application.

Your signature: Date: Click here to enter a date.

Please send this completed application form, together with certified copies of your official academic record or a statutory declaration accompanying your current unofficial transcript, and evidence of New Zealand Citizenship or Permanent Residence, by:

* Email attachment to: [awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz)

All applications will receive an email confirming that the application has been received. If you do not receive an email, please contact the Awards Coordinator at [awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz)

**Closing date: 30 January 2024.**

THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

MASTER’S DEGREE AWARDS

Reference

The purpose of the Master’s Degree Awards is to assist women graduates to carry out full-time study for a Master’s Degree at an approved Institute in the Auckland area. All information supplied is confidential to those involved in the selection procedures.

Please complete the following form and e-mail to [awards@kateedgertrust.org.nz](mailto:awards@kateedgertrust.org.nz) using the subject line ‘Master’s Degree Awards’.

|  |  |
| --- | --- |
| **Applicant** | **Referee** |
| Name: Click here to enter applicant’s name. | Name: Click here to enter referee’s name. |
|  | Institute: Type name of tertiary institute. |
|  | Department: Click here to enter department. |
|  | Position: Click here to enter job position. |

As you have had an opportunity to form a view of the applicant’s work, study and progress, we invite you to comment on the applicant’s commitment to her work, research ability, potential and any other relevant comments:

Click here to enter text.

How long have you known the applicant?

Click here to enter text.

In what capacity do you know the applicant?

Click here to enter text.

Signed: Date: Click here to enter a date.

THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

MASTER’S DEGREE AWARDS

Reference

The purpose of the Master’s Degree Awards is to assist women graduates to carry out full-time study for a Master’s Degree at an approved Institute in the Auckland area. All information supplied is confidential to those involved in the selection procedures.

Please complete the following form and e-mail to [awards@kateedgertrust.org.nz](mailto:admin@kateedgertrust.org.nz) using the subject line ‘Master’s Degree Awards’.

|  |  |
| --- | --- |
| **Applicant** | **Referee** |
| Name: Click here to enter applicant’s name. | Name: Click here to enter referee’s name. |
|  | Institute: Type name of tertiary institute. |
|  | Department: Click here to enter department. |
|  | Position: Click here to enter job position. |

As you have had an opportunity to form a view of the applicant’s work, study and progress, we invite you to comment on the applicant’s commitment to her work, research ability, potential and any other relevant comments:

Click here to enter text.

How long have you known the applicant?

Click here to enter text.

In what capacity do you know the applicant?

Click here to enter text.

Signed: Date: Click here to enter a date.

STATUTORY DECLARATION

For downloaded documents

**I**

Click here to enter your full legal name

**of**

Click here to enter your residential address.

**solemnly and sincerely declare that the following documents (copies of which are attached to this declaration) have been obtained and printed without alteration from the internet or email sources**

¶ *Note: what you write must be true. You can be prosecuted for making a false declaration*.

|  |  |  |  |
| --- | --- | --- | --- |
|  | | *Date downloaded* | *No of pages* |
| A | Click here to enter a description of document A. | Click here to enter a date. | Click here to enter text. |
| Click here to enter website URL or sender’s email address. |
| B | Click here to enter a description of document B. | Click here to enter a date. | Click here to enter text. |
| Click here to enter website URL or sender’s email address. |
| C | Click here to enter a description of document C. | Click here to enter a date. | Click here to enter text. |
| Click here to enter website URL or sender’s email address. |

¶ *Note: do not complete the section below until you are with the Justice witnessing your declaration*.

**I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.**

Your signature:

Declared at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ before me:

|  |
| --- |
|  |

Signed:

Justice of the Peace for New Zealand