

**PART****A**

# Scholarships Application Form for Continuing Students

Please ensure you read and understand the Terms and Conditions  
of the scholarship for which you are applying.

Student No.  
(if known)

## 1. General Details

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address: (if different from above) \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Email address: \_\_\_\_\_ Date of birth: \_\_\_\_\_

## 2. Academic Details

Which degree/award are you studying or intend to study at UNE? \_\_\_\_\_

Indicate your study mode  On-campus  Off-campus  Full-time  Part-time

## 3. Student Declaration

I declare that all the information submitted is correct and complete.

I give permission for the Scholarships Officer to access my current academic record for the information of the Selection Committee.

I acknowledge that the University may use some information from this application for publicity purposes and that my name may be listed as a successful candidate in the University of New England publications.

\_\_\_\_\_ Applicant Name

\_\_\_\_\_ Applicant signature

\_\_\_\_/\_\_\_\_/\_\_\_\_ Date

## 4. Privacy Statement

The information provided on this application form is being collected to assess your application for a UNE undergraduate scholarship.

This information will be processed by the Scholarships Officer and supplied to the Scholarships Committee. If you are offered a scholarship, this information, together with any additional information provided to support your application will be retained for administrative purposes.

The supply of this information by you is voluntary, however if you do not supply all the requested information we may not be able to assess your application. You have the right to access and/or correct any personal information concerning you held by the University, subject to the reasonable convenience of the University.

UNE's privacy policy can be found on the web at [www.une.edu.au/rmo/policies/privacystatement.htm](http://www.une.edu.au/rmo/policies/privacystatement.htm) or can be provided on request.

## 5. Checklist

- Answer the following questions in your own words.
- Check the Terms and Conditions of the scholarship for which you are applying. If an academic referee's report is required, please complete your applicant details, and have an academic complete the rest of Part B of this form.
- Attach a copy of your academic record of units that have been completed at **other** institutions if applicable.
- Submit your application to the Scholarships Officer, UNE Student Centre by 31 January. Academic staff may submit this form on your behalf.

**Note: If your application is not complete, including documentation, it may not be processed.**





# Academic Referee's Report

## Scholarships Application Form for Continuing Students

**PART  
B**

\_\_\_\_\_  
Name of scholarship for which the applicant is applying

\_\_\_\_\_  
Closing date for submission of application

### Privacy Statement

The information provided in this Referee's Report is being collected to assess the applicant for a University of New England scholarship.

This information will be supplied to relevant committees and administrative staff. However, you may choose to approve the release of the report to the applicant on request.

I am willing for this report to be revealed to the applicant on request.

Yes  No

### Applicant Details

#### Name:

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

#### Address:

Postal Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_ Country: \_\_\_\_\_

#### School/Faculty in which you are enrolled:

School/Faculty: \_\_\_\_\_

Student ID (if UNE): \_\_\_\_\_ Name of university if not UNE: \_\_\_\_\_

### Referee's Details

#### Name and position:

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Second Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Position: \_\_\_\_\_

#### Address:

Postal Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_ Country: \_\_\_\_\_

