



ROSE HELLABY  
MĀORI EDUCATION  
SCHOLARSHIPS



## 2018 MĀORI EDUCATION TRUST

*Tēnā koe e tonono nei mō Ngā Karahipi Māori 2018. Tēnā hoki koe e whai i te huarahi mātauranga hei hāpai i a koe, to whānau, to iwi, otirā, te ao Māori. He huarahi tēnei i whakaritea e ō mātua tīpuna, kia riro i a koe ngā kete e toru o te wānanga.*

*Nō reira, tihei mauriora.*

The Māori Education Trust scholarship programme comprises a range of scholarships for Māori secondary and tertiary students. The purpose of the scholarship programme is to provide support for Māori students to pursue and achieve success in programmes of study and training.

### 2018 ROSE HELLABY POSTGRADUATE SCHOLARSHIP

Rose Hellaby, visionary and benefactor, born 1883 and died aged 91 in 1974. In 1969 Rose established the Maori Education Fund with New Zealand Guardian Trust (now Perpetual Guardian) to provide education opportunities for Māori children and young adults.

The objective of the Rose Hellaby Postgraduate scholarship is to encourage Māori students expand their horizons by pursuing higher education to reach their full potential in their chosen field of study. The scholarships are aimed towards developing today's students into tomorrow's leaders thereby benefitting their Whānau / Iwi and the wider community.

#### ELIGIBILITY

Applicants must:

- i. be of New Zealand Māori descent;
- ii. be enrolled at a tertiary institute at the time the application is submitted;
- iii. meet the criteria for the scholarship;
- iv. submit the application and supporting documentation on time.

Previous recipients cannot reapply for a Rose Hellaby Postgraduate Scholarship.

#### CRITERIA

These prestigious scholarships are available to Māori students with a record of proven academic excellence, undertaking Masters or PhD postgraduate study in the fields of engineering, mathematics, science, technology or medicine. Study can be carried out in New Zealand or overseas.

As this is a form of recurring scholarship, conditions will be placed on the award. Conditions will include the annual submission of academic results, annual progress reports from the successful recipient and supervisor or Head of Department, and a signed contract which will include these conditions and a refund policy should study cease.

As part of the selection process, interviews will be conducted by the Judging Panel. The Rose Hellaby Postgraduate Scholarships funds are administered by Perpetual Guardian. As such, a representative of Perpetual Guardian may be included in the selection of scholarship recipients.

**VALUE:** Up to \$30,000

**No. of recipients:** Up to 2

**IMPORTANT INFORMATION**

1. Incomplete or late applications will not be considered.
2. Additional Information including missing or corrected information, must reach the Māori Education Trust by the closing date. Late information will not be accepted.
3. The Māori Education Trust does not accept any responsibility for lost or delayed application packages caused by incorrect mailing instructions or delays in delivery.
4. You must advise the Māori Education Trust of any changes to your application. All changes must be advised in writing (email and post are acceptable).
5. Please do not staple your papers together; use a paper clip or place in a plastic sleeve.
6. All applicants (successful and unsuccessful) will be notified in writing within three months after the scholarship closing date.

**CLOSING DATE**

Applications close at **4.30 pm, Friday, 6 Paenga-whāwhā (April) 2018.**

**Postal Address:** Māori Education Trust  
P O Box 31213  
LOWER HUTT 5040

**Physical Address:** Level 1  
65 Waterloo Road  
LOWER HUTT 5010

**Phone:** (04) 586 7971

**Email:** [info@maorieducation.org.nz](mailto:info@maorieducation.org.nz)



ROSE HELLABY  
MĀORI EDUCATION  
SCHOLARSHIPS



## 2018 Rose Hellaby Postgraduate Scholarship Application Form

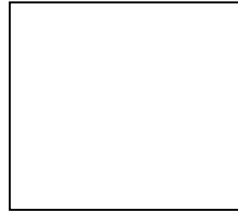
(Please print clearly)

PERSONAL DETAILS			
Surname			
First Name			
Middle Name(s)			
Gender		Date of Birth	/ /
Address			
Suburb / RD Number			
Town / City		Postcode	
Home Phone	(0 )	Daytime Contact / Mobile	(0 )
Email Address (1)			
Email Address (2)			
PRIMARY RESIDENTIAL ADDRESS (if different from above):			
Address			
Suburb / RD Number			
Town / City		Postcode	

BANK ACCOUNT DETAILS			
a) NZ Bank Account Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Bank	Branch	Suffix
b) Name of Account Holder:	_____		
NOTE: Please provide an encoded bank deposit slip or bank verification of your bank account number.			

**PHOTO**

Please attach a recent passport size photograph.

**KOROWAI MĀORI**

Iwi	1. 2. 3.
Hapū	1. 2. 3.
Marae	1. 2. 3.

**WHAKAPAPA**

Please complete this section of your whakapapa:

_____	_____	_____	_____
Grandfather	Grandmother	Grandfather	Grandmother
_____		_____	
Father		Mother	
_____			
Applicant			

Whakapapa certification – You must have your whakapapa confirmed by a Kaumātua. (Alternatively, evidence you are registered with your Iwi is also acceptable.)

Certifier's name: \_\_\_\_\_

Certifier's signature: \_\_\_\_\_

Certifier's phone number: \_\_\_\_\_

### TE REO MĀORI

He mea nui te reo Māori ki a mātou o Toitū Kaupapa Māori Mātauranga. Tena tohua mai ngā āhuetanga hei whakarite i to aroha ki te reo:

- |    |   |                             |                              |
|----|---|-----------------------------|------------------------------|
| a) | Kei te hiahia au ki te ako i te reo Māori:      | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| b) | Kei te ako au i te reo Māori:                   | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| c) | Kei te āhua mōhio au i te reo Māori:            | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| d) | Kei te matatau au i te reo Māori:               | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| e) | I tipu ake au i te reo Māori:                   | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| f) | Kei te kōrerotia te reo ia rā, ia rā:           | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |
| g) | Ka tuhia aku mahi whakamātautau i te reo Māori: | <input type="checkbox"/> Ae | <input type="checkbox"/> Kao |



**SCHOLARSHIPS**

Please indicate if you have received a Māori Education Trust scholarship in the past (please tick or circle).

N / A	Secondary Scholarship	Undergraduate Scholarship	Postgraduate Scholarship	
I have applied for or am receiving another grant or scholarship (please tick or circle).			Yes	No
Name of Scholarship:			Value:	

**INTENDED POSTGRADUATE STUDY**

Student NSI Number (NZQA):	
Name of your tertiary institute:	
Intended programme of study:	<input type="checkbox"/> Masters Degree in _____ <input type="checkbox"/> Doctorate in _____
Major subject/s:	1. 2.
Degree length full-time (circle):	3 Years      4 Years      Other _____
Year of study in 2018 (circle):	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> 4 <sup>th</sup> 5 <sup>th</sup> Other _____

## ENROLMENT CONFIRMATION

You must provide evidence of enrolment; have your tertiary institute complete this section. Alternatively, an enrolment confirmation letter or paid fees invoices is acceptable.

**NOTE:** *An offer of placement* does not confirm you are enrolled.

a) Name of tertiary institute: \_\_\_\_\_

b) Institute contact details: \_\_\_\_\_

c) Website / Phone number: \_\_\_\_\_

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

d) Course start date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Course end date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

e) Institute's stamp or seal:



f) Certifier's name: \_\_\_\_\_

g) Certifier's signature: \_\_\_\_\_

h) Certifier's phone number: \_\_\_\_\_



**FINANCES**

Please complete the budget below, based on your **net annual income**. (Net income is the amount you receive after tax deductions have been made, which includes Kiwisaver and student loan repayments.)

Anticipated annual income for 2018 <i>(Do not include student loan)</i>		Anticipated annual expenses for 2018	
Student allowance		University fees	
Personal savings		Accommodation	
Earnings (wages)		Meals	
Parental support		Phone, power, etc	
Scholarships/bursaries		Study costs	
Other (please itemise below)		Transport	
		Insurance	
		Entertainment	
		Other (please itemise below)	
<b>Total</b>		<b>Total</b>	
<b>Other Income</b>		<b>Other Expenses</b>	

If your application is unsuccessful, how will you fund your studies?

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**CRITERIA**

Please complete the following:

- a) I am studying towards a:
- Masters Degree
  - PhD

- b) I am undertaking postgraduate study in:
- Engineering
  - Mathematics
  - Science
  - Technology
  - Medicine

- c) I have attached a copy of my academic invoice and / or evidence that shows all course related costs for 2018:
- Yes                       No

- d) List completed undergraduate and postgraduate study in New Zealand and overseas, and attach certified copies of transcripts:

Degree or Professional Qualification	Institute	Place and Country	Years Attended	
			From	To

- e) List any distinctions currently held:
- 
- 
- 
- 

- f) List any of your works which have been published:
- 
- 
- 
-



**CRITERIA (cont'd)**

i) Provide the names and addresses of the **two persons whom you have each asked to forward a confidential reference to the Māori Education Trust.**

**NOTE:** It is your responsibility to ensure references are submitted and received by the Māori Education Trust by the due date. In the past, applications have not been considered due to references not being received.

1. Reference: Involvement and commitment toward iwi, hapū, marae and tikanga Māori.

You must submit a reference from a Kaumātua, leader of a Māori community group (e.g. marae, kapa haka group, etc) or authorised person of a Māori Authority, Rūnanga or Trust Board that comments on the involvement and commitment you show towards your iwi, hapū or marae and tikanga Māori.

Name of Referee: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

2. Academic Reference

The academic referee must be your proposed supervisor or the Head of Department of your host Department. They are required to evaluate your ability to complete postgraduate studies.

Name of Academic Referee: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## DECLARATION

Please read each statement and tick the box next to it if the statement is true; sign and date the form.

- The information I have given in this application is accurate and complete.
- I am of New Zealand Māori descent.
- I am studying full-time.
- I have read and understand the information about each section of this application form.
- I understand that if I accept a scholarship and do not complete my study, I may be required to repay the scholarship.
- I understand that if my application is incomplete it will not be considered.
- If I am a successful recipient, I agree that my award and personal details may be used by the Māori Education Trust or Perpetual Guardian (which administers the Rose Hellaby estate) to promote the Rose Hellaby Postgraduate Scholarship.
- If I am a successful recipient, I understand my details may be shared with the Ministry of Education. I am aware I may receive a call during or after the term of my scholarship as part of the Ministry of Education's verification process.
- If I am scholarship recipient, I will forward a letter of thanks to Perpetual Guardian care of the Māori Education Trust.
- I will provide the Māori Education Trust with my academic transcript, copy of my degree, or annual progress report from my supervisor or Head of Department by Friday, 28 Hakihea (December) 2018.

I have attached:

- An encoded bank deposit slip or bank verification of my bank account number.
- A recent passport size photograph.
- An essay (minimum of 500 words).
- A certified copy of my academic transcripts.
- A copy of my academic invoice or evidence that shows all course related costs for 2018.
- A copy of my Curriculum Vitae.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

### ACKNOWLEDGEMENT OF RECEIPT

Complete if you would like confirmation that your application for the Rose Hellaby Postgraduate Scholarship has been received.

Your name: \_\_\_\_\_

Your email address: \_\_\_\_\_

Date Sent (*office*)

**NOTE: Please check your application to ensure all sections are complete and all required supporting documentation is attached. Each year applications cannot be considered as they are missing supporting documentation such as: testimonial, confirmation of enrolment or whakapapa, academic results, etc, or are unsigned.**

If you have any questions, please don't hesitate to get in touch:

Phone: 04 586 7971

Text: 027 262 8046

Email: [info@maorieducation.org.nz](mailto:info@maorieducation.org.nz)