

Application Form

RMAA NZ Branch Scholarship

Closing Date for Applications: 20th February 2009

Name of Applicant: _____

Address: _____

Telephone: _____

Email: _____

Referee 1: _____

(Name, Position and _____

Contact Details) _____

Referee 2 _____

(Name, Position and _____

Contact Details) _____

I have read and understood the Scholarship Conditions of Application and have attached the following: (Circle Documentation Enclosed)

1. Personal Statement
2. Curriculum Vitae
3. Proof of Enrolment

Signed: _____ **Date:** _____

Copies of conditions of application can be viewed online at <http://www.rmaa.com.au> or obtained from the New Zealand Branch.

Applications should reach;

Postal Applications - P.O. Box 5643
Lambton Quay
Wellington 6145

Faxed Applications - 0800 400 626

Email Application - www.rmaa.com.au

No extensions will be granted - All supporting Information must be included with application