



Empowering youth to create brighter futures

FUNDING SCHOLARSHIP APPLICATION

OFFICE USE ONLY:
DATE RECEIVED: _____
VOYAGE NO: _____
BERTHNO: _____

Spirit of Adventure Trust has funding scholarships available to assist young people who can demonstrate a need for financial support with their voyage fee.

Please only continue with this funding scholarship application if you will be 16-18 years of age during the time of your voyage and a New Zealand citizen or resident. Permanent residents need to supply proof of residency with this application.

The more information and effort you provide, the more likely you are to receive the scholarships you seek. Please note that your application will be kept confidential within our scholarship team.

PARTICIPANT DETAILS

Name of Participant: _____ Date of Birth: _____ / _____ / _____
First Names Last Name Day Month Year

Ethnicity – Which ethnic group do you belong to? Gender: Female/Male /Other Gender Identity: _____
 (please note this is for statistical purposes only):

NZ European Maori Pacific Island Asian Other: _____

Country of birth: _____

FUNDING SCHOLARSHIP QUESTIONS

Student/ Trainee

1. What do you hope to achieve from a 10 Day Voyage? i.e. for your CV, build confidence, meet new people.

2. Please tell us about your home and financial situation (confidential) i.e. How many people live at home, how many incomes do you or your family have, do you have a Community services card or other benefits. If so, please supply supporting copies of pay slips, bank statements, WINZ statements and attach to your application.



FUNDING SCHOLARSHIP APPLICATION

FUNDING SCHOLARSHIP QUESTIONS continued...

Parent/ Guardian

1. How will a scholarship benefit your nominee?

2. How have you supported this young person in their goal to come aboard?

3. What amount of funding scholarship are you applying for?

4. If applying for a scholarship with no fundraising attempted, please explain why.



Empowering
youth to create
brighter futures

FUNDING SCHOLARSHIP APPLICATION

FUNDING ACTIVITY LOG

Please include all information of your fundraising efforts, whether successful or not. Include a copy of letters/ emails/ phone calls/ meetings with potential sponsors etc. Funders love to hear from you!

PERSONAL FUNDRAISING

i.e. Friends and family, chores, selling unwanted items, gifts, set up a fundraising page, school, organise an event or bake sale

Description	Amount raised	Description	Amount raised

COMMUNITY SUPPORT

You should approach local groups such as:

i.e. Rotary, Lions, Local organisations and businesses.

Think about the services you and your family use – phone, car dealership, bus, landlord, power/water/other utility companies. Also try searching the internet for local youth scholarships in your area.

Application To:	Contact Details:	Date applied:	Reply Received:	Funding Received	Copy of letter/reply attached

VOLUNTEER WORK

If applying for a full scholarship a minimum of 16 hours is required.

This can be at a school, local hospital, care home, SPCA, Kohanga Reo, Church, Sports Club, environmental, Surf lifesaving, Marae etc.

Organisation	What you did	Hours	Contact name	Contact number	Contact signature

FUNDING SCHOLARSHIP APPLICATION

FUNDS RAISED

Any money fundraised can be added to your account at any time, by depositing the money into Spirit of Adventure Trust bank account:

Spirit of Adventure Trust:

02 0108 0095494 00

Reference:

Participant Full Name and Voyage Number

CHECK LIST

- All questions are completed
- All information is attached to support your application regarding your financial circumstances i.e. WINZ statements, benefits, community services card, pay slip.
- Attached is a referee statement endorsing your application and record their contact details below. This could be a teacher, Kaumatua, employee or community leader. (can not be a family member)

Name of Referee: _____ Position: _____
First Names Last Name

Relationship to participant: _____

Address: _____

Postcode: _____

Phone: (____) _____ Mobile: (____) _____

Email: _____

DECLARATION

I/we declare that all details in this funding scholarship application are true and correct.

I am willing to speak /write a letter to a funder in order to help others get future funding.

I will come back on Spirit of New Zealand, as a leading hand on a 10-Day Voyage as a volunteer, before I turn 20 years old.

I am aware that I will be invoiced the full amount until all forms are completed and accepted.

I accept that if required by the funder my name, age, ethnicity, gender, region and school maybe released to the funder for Audit purposes.

Participant (signature): _____ Date: ____/____/____

Parent(s) /Guardian(s) (signature): _____ Date: ____/____/____

THANK YOU

Thank you for your application for a funding scholarship. Your application will be processed and we may contact you with further questions for clarification. Funding scholarships are only made possible due to the generosity of donors and sponsors. Please note that there is a demand for funding scholarships and we cannot guarantee your application will be successful.

If you have any questions regarding your funding scholarship application, please contact Julia Bryant mbl: 021 554 453 or email julia.bryant@spiritofadventuretrust.org.nz

OFFICE USE ONLY:

Amount applying for: _____

Voyage Number: _____

Voyage date: _____

Fund name: _____

School / Area: _____

Approval date: _____

Comments: _____

Authorised: _____