

# THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

## MASTERS DEGREE BY RESEARCH AWARD

### PURPOSE

To assist a woman graduate to carry out study for a Masters Degree by Research at an approved institution in the Auckland area. One award will be made for a year of study that includes only research or a mixture of at least 70% research plus coursework.

### REGULATIONS

1. One Masters Degree by Research Award of \$7,000 shall be offered annually.

**Closing date: 17 February**

2. Applicants for the Masters Degree by Research Award must be:
  - a) women;
  - b) New Zealand Citizens or Permanent Residents;
  - c) enrolled or preparing to enrol full time for a Masters Degree at one of the following institutions: The University of Auckland, the Albany Campus of Massey University, AUT University, Manukau Institute of Technology, Unitec, Northland Polytechnic, or Te Whare Wananga O Awanuiarangi, Auckland.
3. In making this award, the selection committee shall give consideration to:
  - a) applicant's academic record;
  - b) applicant's referees' reports;
  - c) applicant's need for financial assistance;
  - d) applicant's aspirations for the future;
  - e) any special circumstances e.g. family responsibilities, personal disability, considered relevant.
4. Each applicant for this award must submit her application **on the current prescribed application form**, together with:
  - a) a certified copy of her academic record;
  - b) a certified copy of evidence of status as a New Zealand Citizen or Permanent Resident;
  - c) references from two referees on the prescribed forms and in sealed envelopes.

*"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).*
5. This award may not be held concurrently with an award of higher value except with the express approval of the Awards Committee.
6. The Masters Degree by Research Award shall be paid in one instalment on presentation of proof of enrolment as a Masters Degree student at one of the above named tertiary institutions, for example a copy of the receipted fees' invoice or certification from the relevant department.
7. The successful applicant shall make a brief report at the end of her year's study.

### APPLICATIONS AND ENQUIRIES

1. Application forms for this award are available from:
  - a) Scholarships and financial support offices of the above named tertiary institutions
  - b) The website [http:// www.kateedgertrust.org.nz](http://www.kateedgertrust.org.nz)
2. Completed applications to: Masters Degree by Research Award, The Kate Edger Educational Charitable Trust, PO Box 106 882, Auckland City, Auckland 1143.
3. Enquiries to email - [enquiries@kateedgertrust.org.nz](mailto:enquiries@kateedgertrust.org.nz)

**THE KATE EDGER EDUCATIONAL CHARITABLE  
TRUST**  
**MASTERS DEGREE by RESEARCH AWARD**  
**Application Form**

(All information supplied is confidential)

**1. PERSONAL DETAILS**

**Name (Miss/Mrs/Ms)** \_\_\_\_\_

**Student ID No:** \_\_\_\_\_ **Telephone No:** \_\_\_\_\_

**Alternative reliable contact Telephone No:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** (street address, **not** P O Box number)

\_\_\_\_\_  
\_\_\_\_\_

**Are you a New Zealand Citizen:** Yes / No    **Permanent Resident:** Yes / No

*Please supply certified copy of evidence of your status: a birth certificate, citizenship certificate or relevant passport pages.*

**2. ACADEMIC RECORD**

**Degrees/Diplomas:** \_\_\_\_\_ **Year Attained:** \_\_\_\_\_

\_\_\_\_\_

**Major subject:** \_\_\_\_\_

Degree for which you have enrolled or are preparing to enrol: \_\_\_\_\_

Institution & department in which you are enrolling or preparing to enrol: \_\_\_\_\_

\_\_\_\_\_

Expected date of completion of degree: \_\_\_\_\_

Details of any awards you currently hold: \_\_\_\_\_

\_\_\_\_\_

**Please attach a certified copy of your up-to-date academic record.**

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

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**4. Note any special circumstances - family, personal or financial that could be considered as part of your application.**

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**5. Future Goals. Briefly describe the work you intend to undertake once you have completed your course of study.**

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## 5. REFEREES

Write here the names of **two** members of the academic staff from whom you have requested a referee's report.

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**NB: You are responsible for giving your referees the prescribed forms for their reports.**

**Final Check:**

**Have you included:**

- A certified copy of your up-to-date academic record?
- A certified copy of evidence of your status as a New Zealand Citizen or Permanent Resident?
- Two referees' reports in separate sealed envelopes?
- Your application form?

Please ensure you keep a copy of your application.

*The Selection Committee will NOT consider applications that do not contain the above information.*

Your signature: \_\_\_\_\_

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

**Please send this application by 17 February to:**

**Masters Degree by Research Award  
The Kate Edger Educational Charitable Trust  
PO Box 106 882  
Auckland City  
Auckland 1143**

**THE KATE EDGER EDUCATIONAL CHARITABLE  
TRUST  
MASTERS DEGREE by RESEARCH AWARD**

**Referee's Report Form**

*The purpose of the Masters Degree by Research Award is to assist a woman graduate to carry out study for a Masters Degree at an approved institution in the Auckland area.*

*All information supplied is confidential to those involved in the selection procedures.*

**Please complete your report on this form, seal it in an envelope marked MASTERS DEGREE BY RESEARCH AWARD, and return the sealed envelope to the applicant. It is her responsibility to send on her application with the reports from both referees.**

**TO BE COMPLETED BY THE APPLICANT:**

<b>Applicant's Name:</b>	<b>Referee's Name/Title:</b>
<b>Address/Department:</b>	<b>Address/Department:</b>
<b>Closing Date:</b>	<b>Position:</b>

**TO BE COMPLETED BY A MEMBER OF ACADEMIC STAFF**

1. I have known this applicant for .....years in my capacity as .....
2. Comment on the applicant's commitment to her work, academic ability, potential and any other relevant matters:

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**Signature of Referee:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Thank you for completing this form. Your contribution is appreciated.*

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**Signature of Referee:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Thank you for completing this form. Your contribution is appreciated.*