

THE KATE EDGER EDUCATIONAL CHARITABLE TRUST POST-DOCTORAL RESEARCH AWARD

(Dame Joan Metge Post-Doctoral Research Award -
named to honour her contribution to the Awards Programme.)

PURPOSE

To assist women who have graduated with a doctoral degree within the last four years to carry out research on a specified project at an approved institution in the Auckland area.

REGULATIONS

1. One Post-Doctoral Research Award of \$15,000 shall be offered twice a year for a specified, limited term research project. **Closing dates: 17 February, 31 July.**
2. Applicants for this award must:
 - a) be women;
 - b) be New Zealand citizens or Permanent Residents;
 - c) provide evidence that they will be affiliated with a department at an Auckland research institution and have access to the infrastructural support needed to complete the proposed project;
 - d) not undertake full time employment during tenure of the award.
3. In making these awards, the Post-Doctoral Research Award selection committee shall take account of the applicant's academic achievements, research qualification and research plans, and shall determine the conditions of tenure in the light thereof.
4. This award may not be held concurrently with an award of similar or higher value except with the express approval of the Awards Committee.
5. Normally the project for which an award is made should be completed within six months.
6. Each applicant of the award must submit her application **on the current prescribed application form** including:
 - a) an outline of the proposed research;
 - b) a verification statement from the Head of Department as proof of affiliation;
 - c) a certified copy of her academic record;
 - d) a certified copy of evidence of status as a New Zealand Citizen or Permanent Resident;
 - e) references in sealed envelopes from two academic referees, one of whom must be the applicant's PhD supervisor.
7. On completion of her research project, the holder of an award must present a short report, endorsed by the Head of Department to which she is affiliated, to the Awards Convener of The Kate Edger Educational Charitable Trust.
8. Any publications arising from the research should acknowledge the award received from The Kate Edger Educational Charitable Trust.
9. A payment of \$15,000 shall be made at the commencement of research.

APPLICATIONS AND ENQUIRIES

1. Application forms for this award are available from:
<http://www.kateedgertrust.org.nz>

The Scholarships offices of the University of Auckland, the Albany Campus of Massey University, AUT University, Manukau Institute of Technology, Unitec and Te Whare Wananga O Awanuiarangi, Auckland.

2. Enquiries and completed applications to: Post-Doctoral Research Award, The Kate Edger Educational Charitable Trust, P O Box 106882, Auckland City. Auckland 1143.
Enquiries may also go to enquiries@kateedgertrust.org.nz

THE KATE EDGER EDUCATIONAL CHARITABLE TRUST

DAME JOAN METGE POST-DOCTORAL RESEARCH AWARD

Application Form

(All information supplied is confidential.)

In making your application please ensure you complete the three sheets of this printed form.

Apart from your application, the Verification Statement and the reports from your referees, no other information will be considered.

PERSONAL DETAILS

Name (Dr) _____

Student ID No: _____ Telephone No: _____

Email: _____ Mobile: _____

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.

Current Employment Status: _____

PROPOSED RESEARCH PROJECT

Department where proposed research will be undertaken: _____

Research Title: _____

Brief abstract of research to be undertaken: *no more than 500 words, stating aims, objectives and significance. (Use separate sheet .if desired.).*

Draft Budget to show expected costs, e.g. equipment, materials, field work, software, travel, publications etc. (Use separate sheet if desired.)

Total \$

Expected commencement date: _____

Expected date of completion: _____

PROPOSED RESEARCH SUPERVISOR

Title	First Name	Surname	Tertiary Institution
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ACADEMIC RECORD TO DATE

Degree(s) Diplomas: _____ **Years Attained:** _____

Major academic field: _____ **Tertiary Institution:** _____

Scholarships, fellowships, prizes or other awards gained:

Academic research experience, in chronological order – earliest first: _____ **Years**

_____ **From** _____ **To** _____

Relevant refereed publications, books, patents, or reports published or accepted for publication

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

REFEREES

Head of Department / Dean (as appropriate) from whom a Verification Statement has been requested.

Title	First Name	Surname	Tertiary Institution	Position
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Two Referees acquainted with your work from whom you have requested a report, one of whom must be your PhD Supervisor.

Title	First Name	Surname	Tertiary Institution	Position
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YOUR ASPIRATIONS FOR THE FUTURE:

You must have the verification statement completed by the Head of Department, and must give 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?
- A Verification Statement completed by the Head of Department?
- 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 or 31 July to:

**Post-Doctoral Research Award
The Kate Edger Educational Charitable Trust
P O Box 106882
Auckland City
Auckland 1143**

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DAME JOAN METGE POST-DOCTORAL RESEARCH AWARD

Verification Statement

The purpose of these Research Awards is to assist women who have graduated with a doctoral degree within the last four years to carry out research on a specified project at an approved institution in the Auckland area. All information supplied is confidential to those involved in the selection procedures.

Please complete this form and return it to the applicant. It is her responsibility to send on her application with this statement and the reports from her two referees.

Applicant to complete box below:

<p>Applicant's name: _____</p> <p>Research title: _____</p>

HEAD OF DEPARTMENT / DEAN (as appropriate to complete)

The above named applicant for a Post-Doctoral Research Award has received official approval from

to undertake the Research Project described in her application.

Signature of Head of Department / Dean (as appropriate)

Signed: _____ Date: _____

Position: _____

Tertiary Institution: _____

