

EASTBOURNE FREEMASONS' SCHOLARSHIP

Background

In 2006, the Trustees of the Eastbourne Masonic Charitable Trust (EMCT) wound up the Trust and transferred the balance of the Funds to the Eastbourne-Bays Community Trust (EBCT). The Eastbourne Freemasons' Fund is held separately by the EBCT and administered by a sub-committee comprising Freemasons and Eastbourne-Bays Trustees.

The Trustees of the EMCT directed that income from the fund be used as a first priority to provide an annual education scholarship.

Accordingly, The Eastbourne Freemasons' Scholarship has been established to encourage tertiary or post graduate study in the successful applicant's chosen area of expertise.

Eligibility

Applicants for the scholarship must have lived in the Eastbourne-Bays area for a minimum of five years (not necessarily currently) and achieved with distinction in their chosen discipline during a minimum of three years study at a tertiary level.

Scholarship details

The value of the annual scholarship is \$5,500 and will be paid upon confirmation that the successful applicant is able to comply with the terms of the scholarship.

Applications

Application dates are advertised in the Eastbourne Herald.

An application form (attached) is to be completed.

Selection

The selection committee will be the sub-committee referred to above.

The selection committee will invite short-listed candidates for an interview following the closure of the application period.

The selection committee may adopt such processes as it determines.

The decision of the selection sub-committee in making the award of the scholarship will be final and will not be subject to correspondence, appeal or review.

The successful applicant for the scholarship consents to the Eastbourne-Bays Community Trust using the successful applicant's name and general study details for reasonable publicity purposes associated with the award of this scholarship.

EASTBOURNE FREEMASONS' SCHOLARSHIP

APPLICATION FORM

PERSONAL DETAILS

NAME IN FULL:

Ms /Miss /Mrs /Mr /Dr:

Address:

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Pvte. Telephone:

Bus. Telephone:

E-mail Address:

REFEREES

Give the names of two or three persons you have asked to forward confidential references to the Selection Committee. Two must be academic references.

Name: Address:

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Name: Address:

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Name: Address:

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This material should arrive by the closing date for scholarship applications

ELIGIBILITY

Applicants for the scholarship must have lived in the Eastbourne-Bays area for a minimum of five years (not necessarily currently) and achieved with distinction in their chosen discipline during a minimum of three years study at a tertiary level. Indicate compliance below:

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REASON FOR APPLYING FOR SCHOLARSHIP

(Enclose related material like course details.)

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TERTIARY EDUCATION RECORD

(Attach a Transcript of Academic Record.)

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PRIVACY DECLARATION

The application requested in the attached Application form will be used solely for the purposes of assessing my application for the scholarship for which I am applying. Personal information contained in this application will be made available to members of the Scholarship Selection Committee who include a representative from Freemasons NZ who is not necessarily a member of the Eastbourne-Bays Community Trust.

The Eastbourne-Bays Community Trust undertakes to store my application in a secure place in the event that I am successful in gaining the scholarship or if I am selected as a reserve candidate for the scholarship and undertakes to destroy my application to preserve its confidentiality in the event that I am unsuccessful in being awarded the scholarship. Should I have reason to believe that information held about me in either my application or my academic record is incorrect, I have the right of access to, and correction of that information.

I have read and understand the conditions of the scholarship and the privacy provisions.

I agree to abide by them and should I be successful with the Application, I agree to participate in any reasonable publicity which may arise from the award of the scholarship.

Signature of Applicant: **Date:**

COMPLETED APPLICATION FORMS AND REFERENCES ARE TO BE SENT TO:

trustees@ebct.org.nz