RETRAINING AWARDS

In memory of Tressa Thomas,  
In memory of Michele Harris,  
and  
Sponsored by Forge Creative.

**PURPOSE**

These Retraining Awards are to assist mature women, aged 25 and above, to undertake study in order to return to a profession or to take up work (paid or unpaid) in the community.

**REGULATIONS**

A number of Retraining Awards of $2,000 shall be offered annually, and are either in memory of Tressa Thomas, of Michele Harris or sponsored by Forge Creative.

**Closing dates: 18 March 2025**

1. Applicants for these awards must be:
2. women;
3. New Zealand Citizens or **Permanent** Residents;
4. enrolled or preparing to enrol full time\*, in a Certificate, Diploma, or Degree qualification at an approved institute in the Auckland or Northland region.

2. In making these awards, the selection committee shall give consideration to:

1. the course of study;
2. the applicant’s academic background as evidence of ability to complete the course;
3. the applicant’s need for financial assistance;
4. the work (paid/unpaid) the applicant plans to undertake in the future;
5. any special circumstances e.g. family responsibilities, personal disability, considered relevant.

3. Each applicant for this award must submit her application on the current prescribed application form, together with:

1. evidence of acceptance in a Certificate, Diploma or Degree qualification at one of the Institutes named above;
2. a certified copy or statutory declaration of academic results from the current course or any previous study (this can be in the form of a certified digital document from the tertiary institution);
3. details of prior work experience, paid or unpaid (for example, study, work, child-raising);
4. a brief outline of the work, paid or unpaid, she plans to do in the future;
5. a verification from someone that the statements made are correct;
6. a certified copy of evidence of status as a New Zealand Citizen or **Permanent** Resident (not Driver Licence)

**“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). A “Statutory declaration” must be made before a Justice of the Peace or Solicitor on the appropriate form.**

4. The Retraining Award is not available for research or travel expenses (for example, to conferences).

5. The Retraining Awards will be paid in one instalment on presentation of evidence of enrolment at one of the Institutes named above (for example, a receipted fees’ invoice or a certified statement from the relevant department).

6. Each recipient of a Retraining Award is required to make a short written report at the end of the year of study.

7. Please note that the Retraining Award is a one-off award; applications from past Retraining Award recipients will not be considered, however, you are welcome to apply for any of The Kate Edger Foundation’s other awards.

8. A number of special retraining awards will be offered per annum that have been funded by private donors for specific purposes. The recipients of these awards will be selected from the main group of applicants for the Retraining Award, at the discretion of the Selection Panel. The value of these special retraining awards will be $2000.

\*This scholarship is intended for students studying full-time towards a qualification. The Trustees understand that personal circumstances such as health conditions or impairments can limit a person’s ability to study full-time. Applications from students studying part-time due to disability will be therefore considered, but the applicant must include documentation supporting their reason for studying part-time. Examples of supporting documents include a letter of support from a disability service provider, the Students with Disabilities office, or your general practitioner. Students studying part-time due to disability who are successful in their application will be paid a pro-rata amount. For the purposes of this Award, a disability refers to both visible and invisible impairments including: blind and low vision, deaf and hearing impaired, head injury, ongoing medical conditions, diagnosed mental health conditions, physical/mobility impairments, speech impairments, Autism Spectrum Disorder, specific learning disabilities (e.g. dyslexia, dyspraxia, dyscalculia).

**APPLICATIONS AND ENQUIRIES**

Enquiries to: [awards@kateedgerfoundation.org.nz](mailto:awards@kateedgerfoundation.org.nz)

Please scroll down for the application form.

Submit completed applications by email attachment plus scanned copies of 3 a) b), e), and f) above to: [awards@kateedgerfoundation.org.nz](mailto:awards@kateedgerfoundation.org.nz);

All applications will receive an email confirming that the application has been received. If you do not receive an email, please contact the Awards Coordinator at [awards@kateedgerfoundation.org.nz](mailto:awards@kateedgerfoundation.org.nz)

**Closing dates: 18 March 2025**

RETRAINING AWARDS In memory of Tressa Thomas,   
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Application Form

All information provided is confidential

1. PERSONAL DETAILS

Name: Click here to enter text.

Student ID number: Click here to enter text.

Mobile: Click here to enter text.

Personal Email: Click here to enter text.

University Email: Click here to enter text.

Address: Click here to enter text.

Date of Birth: Click here to enter text.

Ethnicity (optional): Click here to enter text.

Will you be a full-time student this year? Choose an item.

Are you a New Zealand citizen? Choose an item.

Are you a **Permanent** Resident of New Zealand? Choose an item.

**Please supply a certified copy of evidence of your citizenship status: a birth certificate, citizenship certificate or relevant passport pages (e.g. if you are a Permanent Resident, you must supply a copy of your Permanent Resident Visa). If you are offered an award, you will be required to prove that you are enrolled as a full-time student for the duration of the award.**

1. ACADEMIC GOALS

What degree or diploma are you enrolled in this year? Name of qualification

Where are you studying? Name of tertiary institute

How many years should this course take a full-time student to complete? Choose the number of years.

What year are you in (if you have had a period of part-time enrolment, select the year that best reflects your progress through this course)? Choose the year.

Give a brief outline of your previous educational background and indicate why you have chosen to undertake your current course of study. Click here to write up to 300 words.

**You should supply academic results, from either the last two years of secondary study or any previous tertiary study, to support your application. We strongly prefer academic transcripts which show your grades.**

1. FINANCIAL CIRCUMSTANCES

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

Click here and write up to 300 words.

Give a brief outline of any employment and community activities in which you are currently engaged:

Click here and write up to 300 words.

Please note any special circumstances (family, personal, or financial) that could be considered as part of your application. These could include number and ages of children, parenting status, health/disability status, your debt situation:

Click here and write up to 300 words.

1. PERSONAL STATEMENT

Briefly explain why you have chosen this course of study and describe the work you plan to undertake once you have completed your course of study:

Click here and write up to 500 words:

1. VERIFICATION

Please provide verification on the prescribed form (next page) signed by someone who knows you well, but who is not a close relative, that the contents of your application are true and you have a genuine desire to gain a qualification.

Give the name of the person you have asked to make this verification here:

|  |  |
| --- | --- |
| Name  Click here to enter text. | Address (postal or email)  Click here to enter text. |

FINAL CHECK

Please check each statement to confirm you have met all requirements:

|  |  |
| --- | --- |
| I have read the purpose and regulations of the award |  |
| I am a full-time student |  |
| I have given full details in every section |  |
| I have enclosed all the supporting documents required, including proof of age, proof of **Permanent** residency or citizenship, and academic results |  |
| I have included a signed verification form |  |

(N.B.) A Statutory Declaration is available at the end of this application form.)

**The Selection Panel will NOT consider applications that do not contain the required information.**

Please keep a copy of your application.

Your signature: Date: Click here to enter a date.

Please send this completed application form, plus scanned copies of evidence of acceptance at one of the named tertiary institutes, certified copies of your official academic record or downloaded unofficial transcripts accompanied by a statutory declaration, evidence of New Zealand Citizenship or **Permanent** Residency, and verification statement, by email attachment to [awards@kateedgerfoundation.org.nz](mailto:awards@kateedgerfoundation.org.nz)

**Closing dates: 18 March 2025**

RETRAINING AWARDS

Verification of Application

The purpose of the Retraining Award is to assist mature women, aged 25 and above, to undertake full-time study in order to return to a profession, or to take up work (paid or unpaid) in the community. All information supplied is confidential to those involved in the selection procedures.

|  |  |
| --- | --- |
| **Applicant** | **Referee** |
| Name: Click here to enter text. | Name: Click here to enter text. |
| Address: Click here to enter text. | Address: Click here to enter text. |
|  | Occupation: Click here to enter text. |

I, Click here to enter the referee’s full name, certify that I have read this application and I believe the statements made by the applicant about the course in which she is enrolled, and her circumstances, to be true.

What information can you give about the applicant’s desire to gain this qualification?

Click here to enter text.

How long have you known the applicant?

Click here to enter text.

In what capacity do you know the applicant?

Click here to enter text.

Signed: Date: Click here to enter a date.

STATUTORY DECLARATION

For downloaded documents

**I**

Click here to enter your full legal name

**of**

Click here to enter your residential address.

**solemnly and sincerely declare that the following documents (copies of which are attached to this declaration) have been obtained and printed without alteration from the internet or email sources**

¶ *Note: what you write must be true. You can be prosecuted for making a false declaration*.

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| A | Click here to enter a description of document A. | Click here to enter a date. | Click here to enter text. |
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| B | Click here to enter a description of document B. | Click here to enter a date. | Click here to enter text. |
| Click here to enter website URL or sender’s email address. |
| C | Click here to enter a description of document C. | Click here to enter a date. | Click here to enter text. |
| Click here to enter website URL or sender’s email address. |

¶ *Note: do not complete the section below until you are with the Justice witnessing your declaration*.

**I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.**

Your signature:

Declared at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ before me:

|  |
| --- |
|  |

Signed:

Justice of the Peace for New Zealand