

2025 Lawson-Smith Scholarship Application Form

Form Preview

Lawson-Smith Freemasons Education Trust Veterinary Scholarship Application

Administered by The Freemasons Charity.

This scholarship is open to students in their 3rd or 4th year, enrolled in a BVS (Bachelor of Veterinary Science) course of study at any Massey University campus in 2024/25.

Please note: *It is the responsibility of the applicants to provide all information requested.*

PRIVACY PROVISIONS

The information requested in this application may be used solely for the purposes of assessing your application. However, if you are successful, your personal information will be used by the Freemasons for promotional purposes.

Should you have reason to believe that information held about you in either your application or your academic record is incorrect, you have the right of access to, and to make corrections to that information.

The application must be submitted by 1 October 2024. No late applications will be accepted.

Applications close: 1st October 2024

Eligibility

* indicates a required field

APPLICANTS PLEASE NOTE:

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this scholarship. It's crucial that you complete these questions before any others to ensure you are not applying for an unsuitable scholarship.

If you have any questions in regards to these eligibility criteria, please contact **charityadmin@freemasons.nz.org**

Confirmation of Eligibility

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I confirm that the applicant ...

- has read and understands the scholarship guidelines;
- is a New Zealand citizen or holds permanent New Zealand residency;
- is enrolled in their 3rd or 4th year of a BVS (Bachelor of Veterinary Science) course of study;
- is studying at any of the Massey University Campus institutions within New Zealand;
- has relevant supporting references and documents.

Please select below: *

☐ Yes ☐ No

You must confirm that all statements above are true and correct.

If you have answered "No" to any of the above questions, you are not eligible for this scholarship.

Applicant Details

* indicates a required field

Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the New Zealand Privacy Principles as established under the *Privacy Act 2020*.

Applicant Details

Student ID *

Applicant *

Title First Name Last Name

Applicant Primary Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Applicant Primary Phone Number

Must be a New Zealand phone number.

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Applicant Primary Email *

Must be an email address.

Tertiary Education Record

* indicates a required field

Have you studied at another tertiary institute? *

☐ Yes

☐ No

Please upload a certified copy of your Academic Record for that study.

Attach a file:

Essay

* indicates a required field

Bio & Community Involvement

Please write a short bio about yourself and your studies; outline your involvement in the community *

Other Scholarships

* indicates a required field

Have you applied for any scholarships or awards for 2024? *

☐ Yes

☐ No

Please list 2024 scholarships and/or awards applied for:

Have you received any scholarships or awards at university? Have you been awarded any for 2024? *

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☐ Yes

☐ No

List all scholarships or awards received at university, and offered/received for the coming year.

Scholarship / Award	Value	Period funding has been provided for
	Must be a dollar amount.	
	\$	
	\$	
	\$	

Upload Supporting Documentation

* indicates a required field

Please upload the following documents to support your application

Upload a statement detailing your recent and current community / campus involvement *

Attach a file:

Proof of New Zealand citizenship or permanent residency *

Attach a file:

A copy of your current CV *

Attach a file:

A recent photo of yourself *

Attach a file:

This photo could be used for publicity purposes if your application is successful.

Declaration

* indicates a required field

I consent to: *

- ☐ The disclosure of personal information I have provided in this form, to staff within the University, for the purpose of assessing my application for a scholarship.
- ☐ The Scholarships Office obtaining any personal information about me which is required for the purpose of this application.
- ☐ Publication of my name and details of any scholarship which I am awarded.

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Please read and answer

I confirm that the information I have provided on the application form is true and correct and I have read and understand the regulations for the Lawson-Smith Freemasons Scholarship and agree to abide by them should I be offered and accept the award.

Date

Must be a date.

Please choose: *

☐ Yes

☐ No

DISCLOSURE OF INFORMATION

The University undertakes to collect, use and store the information you provide in this application according to the principles of the Privacy Act 1993.