



## Application for a CT Collins Scholarship

### General

The C T Collins Research Training Scholarship is provided by the Cancer Society Wellington Division to allow a student to undertake cancer related research/study leading to a Doctorate in Philosophy from a New Zealand University. The successful applicant will be selected on the basis of his/her potential for a career in cancer research and will be a full Time student or ½ time equivalent.

Study in a University must primarily be undertaken within the Wellington Region which includes Marlborough, Nelson and the Wairarapa is required.

### **DURATION OF SCHOLARSHIP:**

The award is for two years, in the first instance, extendable to three years subject to annual review and satisfactory evidence of progress.

Scholarship funding will normally paid to the successful candidate in installments.

### **APPLICATIONS:**

Applications will be reviewed by a Medical and Scientific Committee. This is a sub-committee appointed by the Cancer Society Wellington Division Board.

Applicants may be required to present their application in person to the Committee.

**CLOSING DATE:** 30 April 2013

This application should be forwarded to:

Michael Smith  
The Chief Executive Officer  
Cancer Society Wellington Division  
52 Riddiford Street  
Wellington 6021

Phone: 04 389 8421      [michaels@cancersoc.org.nz](mailto:michaels@cancersoc.org.nz)

Website: [www.cancersoc.org.nz](http://www.cancersoc.org.nz)

**1. Applicant's Name  
& Address**

**Contact Tel/Fax**

**E-mail**

**Employer's Name  
& Address**

**CV Data**

*Please attach a copy of your CV including details of your:*

*Secondary & Tertiary Education. (Certified copies of your  
academic records from tertiary institutions required)*

*Qualifications, Awards & Grants*

*Research Experience*

*Publications (if any)*

## **2. Study Proposed**

**University or Institution:** \_\_\_\_\_

Summary of PHD studies to be undertaken (additional pages can be used)

### 3. Study Costs

University Fees per annum:

Other:

TOTAL

\$NZ

### 4. Other Financial Support.

How much do you expect to receive from:

a. Your employer

\$NZ

b. Other sources  
(please specify)

\$NZ

c. Total

\$NZ

**5. Previous Funding:**

Previous grants received from the Cancer Society by this applicant. Specify purposes, amounts and years:

**7. Institutional Support**

All applications must have sign off from the Head of Department at the Tertiary Institute where study is proposed.

I confirm that \_\_\_\_\_ has approval for PHD studies as outlined in this application.

Name:

Position:

Signature:

Date:

## 8. Referees

All applications for funding should also include letters from two referees and any other supportive information.

Please tick box if included.

## 9. Applicant declaration:

I \_\_\_\_\_ confirm that to the best of my knowledge the information in this application is true and correct.

Signature: \_\_\_\_\_

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