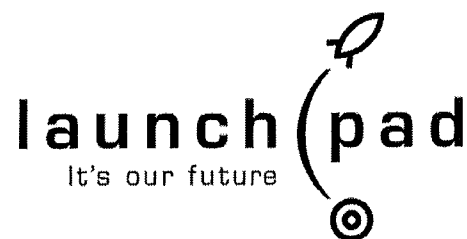


application form



This information is collected for the purpose of assessing your suitability for acceptance into the Launchpad Programme. The completion of this form does not comprise acceptance.

	name:	gender: male / female
	address:	city:
	suburb:	mobile: (if available)
	phone:	Do you smoke? YES / NO
	email: (if available)	Do you need corrective lenses? YES / NO
	school attended:	Do you suffer from any condition, illness or injury that may affect your ability to work? YES / NO
	date of birth:	number of credits achieved (at highest qualification):
	ethnicity:	Car available for work? YES / NO Demerits/Endorsements? YES / NO
	highest school qualification:	drivers licence: None / Learners / Restricted / Full
	number of years at secondary school:	

REFEREE'S

	Work	School
	name:	name:
	company:	school:
	phone:	phone/email address:

ADDITIONAL INFORMATION

The information you have provided may be forwarded to other service providers, are you in agreement with this?	Yes	No
Are you happy for Launchpad to contact your referees?	Yes	No
Do you have any criminal convictions or pending charges?	Yes	No

Signature:..... Date:.....
(Please sign above as confirmation that the information you have provided is true and correct)

	Please post the following to Launchpad, PO Box 621, Dunedin:
	<ul style="list-style-type: none"> ✓ Completed Application form ✓ Handwritten letter explaining why you would like to be considered for the scholarship programme ✓ Curriculum vitae (CV) including employment and life experiences (please include computer software used and competency level)
Note: A small fee is applicable towards the running of the programme.	