


# 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?	<b>Yes</b>	<b>No</b>
Are you happy for Launchpad to contact your referees?	<b>Yes</b>	<b>No</b>
Do you have any criminal convictions or pending charges?	<b>Yes</b>	<b>No</b>

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 1816, Christchurch:
	<ul style="list-style-type: none"> <li>✓ <i>Completed Application form</i></li> <li>✓ <i>Handwritten letter explaining why you would like to be considered for the scholarship programme</i></li> <li>✓ <i>Curriculum vitae (CV) including employment and life experiences (please include computer software used and competency level)</i></li> </ul> <p><b>Note: A fee is applicable towards the running of the programme.</b></p>