## **Buller Veterinary Services Inc Application Form 2026**

Closing date Monday, 9 February 2026

Name of individual or entity				
Physical address				
Mailing address (if different)				
Contact Details	Home telephone number			
	Work telephone number			
	Cellphone			
	Email			
Date of Birth (if individual)		/		
Individuals intending to undertake tertiary study should complete this section				
1. Which tertiary institute and degre	e/course will you attend/are	intending to attend in 2026?		
2. Please outline the reasons for your study choice, your career intentions and your plans for using the skills and knowledge you will attain (continue separate sheet with necessary)				
	e separate sneet with needs	sary)		
	e separate sireet with necess	sary)		
	e separate sireet with necess	sary)		
		sary)		

Tertiary to date (if applicabl	e) - List subjects and grades
1.	4.
2.	5.
3.	6.
NCEA Level 3 - List subjects	and grades
1.	4.
2.	5.
3.	6.
Other – List subjects and gr	ades
1.	4.
2.	5.
3.	6.
What examinations (if any)	will you be sitting/have you sat in 2024 for which you are awaiting grades

4.	Personal Achievements
	Please list (with relevant dates) any educational, community and other distinctions, awards or acknowledgements you have received.
5.	Interests/Activities
	Please provide a brief outline of your individual, sporting and community interests and activities.
6.	Incomo
0.	Under What will your main source(s) of financial support be while you are studying and are you/have you sought funding elsewhere? (Please provide details including monetary value)

_				
7	ΡI	9259	enc	വാല

- At least two references
- Official copies of examination and academic records

## • Groups/Organisations should complete this section

1.	Please provide a clear outline of your project (continue congrete cheet if necessary)	
1.	Please provide a clear outline of your project (continue separate sheet if necessary).	
•••••		••••••
•••••		
2.	Cost breakdown (summarise here, but also use separate sheet if necessary. Attach quotes f	rom two sources (if
	relevant)	
••••••		••••••
3.	Has the organization applied for funds for the same purpose from any other source?	YES/NO
J.	Thas the organization applied for funds for the same purpose from any other source:	123/110
	If so:	
		Outcomo
	Other organization applied to: Amount	Outcome

Applicant(s) to sign:
In accordance with the Privacy Act 2020 I authorize Buller Veterinary Services Inc to utilise the information contained within this application for the sole purpose of determining a successful candidate for the Scholarship(s). I understand the information in this application will be used for no other purpose unless I am a successful applicant in which case some information may be required for mediate release to promote the scholarship.
I declare that the information contained in this application is correct to the best of my knowledge and belief and that I have not been convicted of any criminal offence.
Signed: Date:
Name in full: