

SURNAME: _		
Massev ID Nu	mber (if applicable):	

MASSEY UNIVERSITY IMBS DOCTORAL STUDENTSHIP APPLICATION FORM

PART A: TO BE COMPLETED BY APPLICANT

PERSONAL DETAILS		
Name in full: Ms/Miss/Mrs/Mr		
Address: (for contact at all times)		
Telephone: ()		
E-mail address:		
ARE YOU A NEW ZEALAND CITIZEN O	OR PERMANENT RESIDENT?	YES □ NO □
If you answered NO to the above, or you having if applicable, complete page 3 of the applicat		niversity, please read and
Title of Research:		
Campus: Auckland Palmerston North	n 🗆	
Name of proposed Supervisor:		

May 08 1

	SURNAME:
TERTIARY EDUCATIONAL RECORD	Massey ID Number (if applicable):

Institution	Place & Country	Years Attended		Degrees, Diplomas or
		From	То	Certificates gained

ACADEMIC RECORD

If you have studied at a New Zealand University other than Massey University, or overseas, you must provide a certified copy of your Academic Record for that study. If all your study has been at Massey University you are not required to provide an Academic Record. If English is not the first language at the institution(s) at which you studied, you must provide a certified translation of your Academic Record for that study. **Please see page 3 for further details.**

OTHER SOURCES OF FUNDING Please state if you have applied for or programme of study. Please specify:	are in receipt of other scholarships, bursaries or funding for this	
Date:	Signature:	

Please send the completed form to:

Ann Truter

IMBS

Massey University (PN 462)

Private Bag 11-222

PALMERSTON NORTH 4442, NEW ZEALAND

May 08 2

SURNAME:	
Massey ID Number (if applicable):	

ADDITIONAL REQUIREMENTS FOR APPLICANTS WITH OVERSEAS QUALIFICATIONS

Applicants who do not have New Zealand Citizenship or Permanent Residency or whose previous academic study has been undertaken at an overseas university must provide the following additional information.

PERSONAL DETAILS		
Place and country of birth		
Country of citizenship (if different)	from place of birth)	
ACADEMIC QUALIFICAT	ΓIONS	
Applicants holding academic qua	difications from all count	ries other than New Zealand, Australia, Germany, or the
United States of America must an	range a course by course	evaluation by:
Education	on Credential Evaluators,	Inc
P O Box	x 514-070	
Milwau	kee	Telephone: +1 414 289 3400
Wiscons	sin 53203-3470	Facsimile: +1 414 289 3411
United S	States of America	Email: Eval@ece.org
Internet	address: http://www.ece.	org
Applicants are required to pay fo	r the course by course ev	valuation, with the applicant and the University each
receiving a copy of the resulting	evaluation report. (The cu	urrent cost for the course by course evaluation is US\$135.00.)
For applicants with overseas qua	lifications who are award	ed a Massey Doctoral Scholarship, a one off payment of up
to \$NZ250.00 will be made towa	rds reimbursement of the	cost of the evaluation report. Successful applicants will need
to provide proof of payment (i.e.	a receipt), in order for rei	imbursement to be made with the first monthly stipend.
Date applied for Education Crede	ential Evaluation (if applica	able):
ACADEMIC QUALIFICAT	TIONS FROM INSTI	TUTIONS WHERE ENGLISH IS NOT THE FIRST

ACADEMIC QUALIFICATIONS FROM INSTITUTIONS WHERE ENGLISH IS NOT THE FIRST LANGUAGE

If the applicant's previous study was at an institution at which English is not the first language, applicants are required to provide a certified translation of their academic record from that institution.

Applications will not be considered unless all the above documentation has been received.

May 08 3