The Mason Durie Pae Ora Scholarship
Application Form

PERSONAL INFORMATION

Family name:	
Given name(s):	
Iwi/Hapū	
Phone number:	
Email address:	

I can confirm Māori Ancestry ☐ Yes ☐ No

Is your study full time? ☐ Yes ☐ No

STUDY DETAILS

Student ID Number (if applicable)	
Programme of Study	
Department	
Academic Institution	
Supervisor (if applicable)	
Proposed topic for Master's/PhD thesis study (if applicable)	

Please list your papers for 2027

ID/Code	Name	Semester/Term

Amount Requested

Please list all direct course-related costs to be considered as part of this application. (ie; course fees)

Item	No. Unit	Cost Per Item	Total Costs
			$
			$
			$
			$

Total	**$0**

REFEREE #1 – Academic

Name:	
Phone:	
Position:	
Email:	

REFEREE #2 – Other

Name:	
Phone:	
Position:	
Relationship to you:	
Email:	

Privacy Statement

- **The information provided in your application and your academic record will be used for the purpose of assessing your application for the scholarship for which you have applied.**
- **Te Rau Ora agrees to store your application in a secure and confidential place.**
- **If my application is successful, I agree that Te Rau Ora may use my scholarship and personal details or images on positive publicity for the Mason Durie Pae Ora Scholarship.**
- **Applicants shall agree to co-operate with any publicity of the scholarship for which they have applied. Such publicity may include material provided with your application, photographs, and interviews with scholarship recipients.**

Declaration

- I have read and understood the privacy statement above and agree to its conditions.
- I have read and understand the guidelines for the Scholarship and agree to abide by them.
- I declare that, to the best of my knowledge, all the information supplied in and attached to this form is true and correct.
- I accept that providing false and incomplete information may result in the loss of any scholarship awarded.

Applicants Signature: _____ Date: _____

THE FOLLOWING DOCUMENTS MUST BE ATTACHED TO YOUR APPLICATION

☐ **Research Abstract**

☐ **Reason for applying for this Scholarship** (explain how you will honour Mason Durie's aspirations for pae ora and flourishing whānau)

☐ **Curriculum Vitae**

☐ **Academic Transcript**

☐ **2x Letter of Reference** (1x from Tertiary provider and 1x from existing Māori health leader and/or community leader)

SUBMITTING YOUR APPLICATION FORM

The completed application form and supporting documents should be sent to:

Email: scholarships@terauora.com

The completed application form and supporting documents must be received no later than **5pm, 11 December 2026.**