|  |
| --- |
| **Global Women Activate Leaders Programme 2019**  **Scholarship Application Form** |
| **GLOBAL WOMEN**  **Who we are**  Global Women is a non-profit membership organisation with over 300 exceptional female members.  We partner with influential people and forward-thinking brands to drive inclusion and diversity in leadership.  **Our Dream**  The best country to live, work and play in – a prosperous nation underpinned by diverse leadership.  **Our Purpose**  To encourage diversity in leadership in Aotearoa New Zealand through promoting, encouraging and facilitating the development of New Zealand women. |
| **ACTIVATE LEADERS PROGRAMME SCHOLARSHIPS**  Thank you for applying for a Global Women Activate Leaders Programme 2019 scholarship.  Please complete the following form outlining your rationale for wanting to be on the programme.  Please provide a brief written reference from your manager or someone who can provide some insight into your leadership strengths and development needs. |
| COMPLETED FORMS MUST BE SENT TO:Michelle Huang, Interim Programme Manager – Leadership Development, Global Womenmichelle.huang@globalwomen.org.nz |
| **GLOBAL WOMEN ACTIVATE SCHOLARSHIP CRITERIA:** She is a valuable employee, recognised by her organisation as a high-potential individual.She is motivated to be an effective leader and succeed in her career.She may actively contributes to her community/iwiShe is able to challenge peers, yet also empathises with and supports them.She is intellectually curious and willing to step outside her comfort zone.She is interested in supporting women perform at their best.She must be a citizen or permanent resident of New Zealand.She could be from a non-profit organisationShe could be running her own businessShe could be transitioning back from parental leave or career break.THE TINDALL FOUNDATION – NOT FOR PROFIT/COMMUNITY ACTIVATE SCHOLARSHIP CRITERIA;She MUST be from the Not for Profit/Community sectorShe is a valuable employee, recognised by her organisation as a high-potential individual.She is motivated to be an effective leader and succeed in her career.She may actively contributes to her community/iwiShe is able to challenge peers, yet also empathises with and supports them.She is intellectually curious and willing to step outside her comfort zone.She is interested in supporting women perform at their best.She must be a citizen or permanent resident of New Zealand.She could be transitioning back from parental leave or career break. |

|  |
| --- |
| SCHOLARSHIP INFORMATION:The scholarship covers full/partial programme fees including course materials, catering & graduationThe scholarship DOES NOT COVER TRAVEL and accommodatiom or any other associated costs for you to attend the programme.You must be able to attend all dates for your chosen programme location |
| PLEASE HIGHLIGHT THE SCHOLARSHIP YOU WOULD LIKE TO APPLY FOR: GLOBAL WOMEN ACTIVATE SCHOLARSHIP (PARTIAL) (Valued at $2,500 per scholarship, covers programme fees only - Applicants or their organisations to cover the remaining programme fee of $2,500 + GST)  THE TINDALL FOUNDATION - NOT FOR PROFIT/COMMUNITY – ACTIVATE SCHOLARSHIP (FULL) (Valued at $5,000 per scholarship, covers programme fees only) |
| PLEASE HIGHLIGHT THE LOCATION YOU WOULD LIKE TO APPLY FOR: AUCKLAND(Workshops 30 May, 27 June, 8 August, 5 September – Graduation 17 October) WELLINGTON(Workshops 13 June, 1 August, 5 September, 24 October – Graduation 14 November CHRISTCHURCH(Workshops 25 June, 8 August, 12 September, 30 October – Graduation 21 November) HAMILTON(Workshops 13 June, 1 August, 29 August, 26 September – Graduation 4 November) NEW PLYMOUTH(Workshops 27 August, 24 September, 11 November, 10 December - Graduation 10 December |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | PERSONAL INFORMATION  |  | | --- | | Full Name: Click here to enter text. | | Ethincity: Click here to enter text. | | Iwi: Click here to enter text. | | Language(s) spoken: Click here to enter text. | | Date of Birth: Click here to enter text. | | Dietary requirements: Click here to enter text. | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CONTACT DETAILS  |  |  | | --- | --- | | Business Landline: Click here to enter text. | Mobile: Click here to enter text. | | Business Email: Click here to enter text. | Personal Email: Click here to enter text. | | Postal address: Click here to enter text. | | | PA Name: Click here to enter text. | PA Email: Click here to enter text. | | PA DDI: Click here to enter text. | PA Mobile: Click here to enter text. | |
| ORGANISATION INFORMATION  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Company/Organisation Name: Click here to enter text. | | | | | | | | Position/title: Click here to enter text. | | | | | | | | Length of Employment: Click here to enter text. | | | | | | | | Please tick which best describes your organisation: | | | | | | | | Commercial | | | Iwi | | Academic Institution | | | Government Agency | | | Not For Profit/CommunityCharititable Trust/SocietyCharities Number:Registration Number: | | Other: Click here to enter text. | | | Current Industry(s): |  | | | | | | | Product/Services: |  | | | |  | | | # direct reports: | | Click here to enter text. | | Total # employees: | | Click here to enter text. | | |
| EMPLOYMENT HISTORY  |  |  |  | | --- | --- | --- | | Name of Company | Title/Responsibility | From (m/y) – To (m/y) | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Out of all the roles above, which has been the most significant and why? | | | | Click here to enter text. | | |  EDUCATION HISTORY  |  |  |  | | --- | --- | --- | |  | Academic Institution | Year | | **Click here to enter text.** | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | Click here to enter text. | Click here to enter text. | Click here to enter text. | | If you’d like, please elaborate with comments: | | | | Click here to enter text. | | |  ACTIVITIES/LEADERSHIP HISTORY  |  |  | | --- | --- | | Vocational/Professional | Click here to enter text. | | Community Interests | Click here to enter text. | | Extracurricular | Click here to enter text. | | If you’d like, please elaborate with comments: | | | Click here to enter text. | | |
| PERSONAL INSIGHTS  1. Please describe your current responsibilities, including your level in the organisation.   Click here to enter text.   1. Please describe your professional and personal goals within the ext 1-3 years ( family/whanau, relationships, career, contribution, leisure time, income)   Click here to enter text.   1. What would you hope to gain and learn from the Activate programme?   Click here to enter text.   1. How will your participation on the Global Women Activate Leaders Programme benefit your organisation or company/community?   Click here to enter text.   1. What do you believe you can contribute and offer to other participants in this programme (e.g. skills, expertise, perspectives, cultural)?   Click here to enter text.   1. How has/is your culture and heritage shaped/shaping who you are as a leader?   Click here to enter text. |
| REFEREE INFORMATION Management Team   |  |  | | --- | --- | | REFEREE CONTACT DETAILS | | | Full Name: Click here to enter text. | | | Position: Click here to enter text. | Company/ Organisation Name: Click here to enter text. | | Postal Address: Click here to enter text. | | | Phone: Click here to enter text. | E-mail: Click here to enter text. |  BILLING CONTACT DETAILS Management Team   |  |  | | --- | --- | | BILLING CONTACT DETAILS | | | Full Name: Click here to enter text. | | | Position: Click here to enter text. | Company/ Organisation Name: Click here to enter text. | | Postal Address: Click here to enter text. | | | Phone: Click here to enter text. | E-mail: Click here to enter text. |  I certify that all the information and accompanying material provided in connection with this application is genuine, true and accurate. SIGNATURE OF APPLICANT:  DATE: I certify that all the information and accompanying material provided in connection with this application is genuine, true and accurate. SIGNATURE OF REFEREE:  DATE: |