

# “OUTWARD BOUND” GRANT - ST MATTHEW’S COLLEGIATE SCHOOL OLD GIRLS’ ASSOCIATION (“SMOGA”)

## Application Form:

### IMPORTANT

Intending applicants should read the Terms and Conditions of the St Matthew’s Collegiate School Old Girls’ Association (SMOGA) “Outward Bound” Grant (The Grant) and refer to the Outward Bound course terms and conditions, and available course dates.

<https://www.outwardbound.co.nz/about-us/terms-and-conditions/>

<https://www.outwardbound.co.nz/courses/course-finder/teen-courses/>

before completing this form.

Please note that The Grant covers a one off grant of \$2,500 incl GST to cover the partial cost of an 8 day or 21 day teen course. Other costs are not covered by the Grant. The Grant recipient is encouraged to fundraise the remainder, or part of, the remainder, of their course costs.

### PART 1 – DETAILS

1. Applicant’s full name and current Year Group (11, 12 or 13).

\_\_\_\_\_

2. Applicant’s email address.

\_\_\_\_\_

### PART 2 – GENERAL

Please tick one of the two boxes below to confirm the eligibility path you are applying for this Grant under:

You are applying for this Grant as a student that is a **daughter, niece or granddaughter of an Old Girl** (The Old Girl must be a fully paid SMOGA Member and have attended St Matthew’s Collegiate School for a minimum of 2 full school years). Please complete Part 2A, 3 and 4 of this application form.

You are applying for this Grant as a student who is a **Student of St Matthew’s Collegiate** that as part of the application will join SMOGA. Please attached to this application a complete SMOGA application form, and complete Parts 3 and 4 of this application form.

Please note: *A student that is in Year 11 and is 15 years old may apply for the “Outward Bound” Grant however if she is selected, she must be 16 years old before undertaking a course.*

**PART 2A – GENERAL**

3. Full name of your mother, grandmother or aunt who attended St Matthew's.

\_\_\_\_\_

4. Their Maiden name (if applicable).

\_\_\_\_\_

5. Their current address and phone number.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Years in which your mother/grandmother/aunty attended St Matthew's.

From \_\_\_\_\_ to \_\_\_\_\_ (inclusive).

**PART 3 – Reason for Application**

1. Please outline why you want to join thousands of young Kiwis each year who get on board to experience a course of a lifetime at Outward Bound, and the benefits that you think you may gain (in under 100 words):


*Please note: In accepting The Grant, you are also agreeing to help the SMOGA promote The Grant to future St Matthew's students. One of the requirements is that after you have undertaken your course you will present to school assembly and explain what the experience was like for you. We recommend that you begin by reading this statement that you have written prior to your course.*

*In addition, in the annual SMOGA magazine (To the Stars) and on their facebook page, they would also like to publicise your experience (with a few photos) and how The Grant contributed to your experience.*

#### **PART 4 – Declaration and Signatures**

In signing this form, you accept the terms and conditions of the St Matthew's Collegiate Old Girls' "Outward Bound" Grant and confirm that the information you have provided is correct. In addition, in signing this form, you confirm that you have read and can meet the Outward Bound Terms and Conditions.

Student

Signature

Date:

In signing this form, you support your daughter accepting the terms and conditions of the St Matthew's Collegiate Old Girls' "Outward Bound" Grant and confirm that you will support her in her fundraising for the remainder of the course fees and if required, assist in travel and accommodation costs to attend her course.

Parent/Caregivers

Signature

Date:

Please submit your application via email by sending to [info@smoga.org.nz](mailto:info@smoga.org.nz), by post using the address below, or drop off a hard copy at the school office.

Please attention to:

The SMOGA Outward Bound Grant Selection Committee

**Address:** 33 Pownall Street, Masterton, 5810, New Zealand

**Phone:** (06) 370 0067

**Email:** [info@smoga.org.nz](mailto:info@smoga.org.nz)