



First Year Apprentices

Purpose and Eligibility Criteria

A. Purpose:

1. To assist people to enter apprenticeships by making grants to qualifying applicants to enable payment of their first year's apprenticeship tools of their trade up to a maximum of \$1500.00 per applicant.
2. To promote the upgrading of vocational and personal skills for the enhancement of employment opportunities.
3. Applicants must show that they are facing financial hardship that means they can't fund the purchase of tools of their trade.

B. Eligibility Criteria:

1. Applicants must be New Zealand residents living and working in Marlborough.
2. Applicants must have commenced an apprenticeship and be required to have tools of trade to enable them to work in their trade for their first year in such apprenticeship.
3. Applicants should furnish a written endorsement from their employer to show that they support the application with reasons why. (The trustees may waive this requirement if they in their discretion think fit.)
4. Applicants must submit a formal application on a form provided by Employment Support Marlborough Trust (ESM).
5. The Trustees may waive or amend any or all of the criteria at their discretion
6. The awarding of grants under this scheme (including the amount of any grant) is at the sole discretion of the Trustees of ESM and no right of appeal shall be available to any applicant.

C. Payment

All grants awarded to an applicant are paid by ESM on invoice direct to the relevant provider of goods or services.

Application Procedure

All applications are to be submitted on the forms provided by ESM.

Funds for this grant scheme are obtained through fundraising and activities conducted by ESM to enable it to meet its charitable objectives in the Marlborough Community.

To obtain forms, or for further information or assistance with completing forms, please enquire with David Hall on (021) 076 0104 or email djhall.6@gmail.com

Applications must be returned or posted to:

**The Grant Scheme
Employment Support Marlborough Trust
PO Box 1137
Blenheim 7240**



First Year Apprenticeships Grant Scheme

Application form

1. Surname _____
2. First Name/s _____
3. Full Postal Address _____

Residential Address (if different from postal address)

Contact phone number _____ Email _____

5. Date of commencement of your Apprenticeship _____
6. Date of the planned finish date of your Apprenticeship _____
7. What is the apprenticeship you have started?

8. Amount of grant applied for \$_____ (maximum \$1,500). Service Provider invoice to be attached

9. Please briefly describe your career plans.

10. Have you applied for any other grants or assistance? If so to whom and what was the outcome of the application(s)?

☐ Yes

☐ No

11. (Optional) Further details (if any) which are relevant to the application:

I declare that all information I have given on this form is true and correct.

Signed: _____

Date: _____

Employer to complete

Name of Employer

I confirm that the Applicant has entered an apprenticeship with me and I endorse this application for the following reasons:

For further details I can be contacted at:

Address:

Phone:

Signed:

Dated:

Checklist

- ☐ Copy of Birth Certificate/Passport for proof of ID
- ☐ Other supporting documentation (if any), including financial statements
- ☐ Copy of Service Provider invoice