

# Mobile Health | Hauora Taiwhenua Rural New Zealand Health Scholarships

## Cover Letter

Student Name:	
Date:	
Māori and Pasifika Scholarship:	Yes / No
Rural Residential Township:	
Contact Email (Please provide a contact other than your school email):	
Contact Number:	

*Please answer the following questions and statement. Each answer should be under the maximum of 400 words.*

Why should you receive this scholarship?

What rural hardships may prevent you from studying health?

Why are you pursuing an education in health?

State any extracurricular activities, volunteering, or events that support your application

*Please attach this cover letter and your two supporting reference letters, and send to [scholarships@htrhn.org.nz](mailto:scholarships@htrhn.org.nz)*

*\*Note: for our Māori and Pasifika applications, one of the reference letters must be a member that can support your ethnicity*