



WHAKATŌHEA EDUCATION GRANT **APPLICATION FORM 2017**

Tēnā koe,

The Whakatōhea Māori Trust Board allocates a portion of its annual income for educational purposes. Any financial assistance given is dependent on the number of applicants and the annual income available.

The closing date for all applications is **4.30pm, Friday 28 April 2017.**

YOU MUST MEET THE FOLLOWING CRITERIA:

- Grants are available to **registered tribal members** who are residing in New Zealand and who are **attending** a nationally registered tertiary institute and studying towards the following:
 - Level 5 & 6 – Diplomas
 - Level 7 - Bachelor's Degree & Graduate Diplomas
 - Level 8 - Post Graduate Diplomas and Bachelor Honour's Degree
 - Level 9 & 10 - Master's & Doctoral Degree
- Applicants must provide evidence of the following (see Section 4):
 - Photo ID
 - Bank Verification
 - Confirmation Letter of Enrolment
 - Signed Declaration
 - Copy of Qualification Invoice/Receipt
- Grants are only available for full-time study (30+weeks in the year) and the tenure of the grant is one year. Applicants must submit a new application each year.

NOTE: Your application will not be considered unless it is fully completed & accompanied by all required supporting documentation.

OFFICE USE ONLY: Date received ____/____/____ Applicant's First Name: _____
Last Name: _____ Roll Number: _____ Hapu: _____
Name of Qualification: _____ Name of Tertiary Provider: _____
Qualification Start Date: ____/____/____ Qualification Finish Date: ____/____/____ Level: _____

- Bank Verification
- Tertiary Confirmation letter of Enrolment
- Qualification Tax Invoice/Receipt
- Signed Declaration
- Photo ID

SECTION 1: REGISTERED APPLICANT DETAILS

Surname: _____

First Name: _____

Middle Name: _____

Also Known AS: _____

Gender: Male Female

SECTION 2: CONTACT DETAILS

Postal Address: _____

Suburb / Town _____

City: _____

Phone (Day): () _____ Mobile: _____

Email: _____

SECTION 3: PAYMENT OF GRANT

Cheques will not be issued. Grants will only be paid by **DIRECT CREDIT** into your bank account.

Bank Account Name: _____

NZ Bank Account No:

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Bank Branch Account number Suffix

A verified Bank Deposit Slip must be attached to confirm the above bank account Name and Number.

Attach bank verification here.

SECTION 4: EDUCATION DETAILS

Student ID: _____

Studying at: _____

Qualification Type _____

(Diploma, Bachelor Degree, Post Graduate, Masters etc.)

Qualification Subject: _____

Qualification Length: _____

Qualification Progress: _____

(What year of study are you currently in)

Course Start Date: _____ Course Finish Date: _____

(Not Invoice Date)

DECLARATION:

I certify that all information supplied in my application form is correct and that my application may be cancelled (without right of review), if the information supplied is incomplete, inaccurate or not supplied.

I consent to all of my information including any personal details and photographs being available to the Whakatōhea Māori Trust Board whom will be able to utilise this information for promotion and publicity to the wider Iwi and for statistical purposes.

I consent to The Whakatōhea Māori Trust Board contacting any agencies to verify that information provided in this application is true and correct, in accordance with the Privacy Act 1993.

Signature _____

Date _____

PRIVACY POLICY

Pursuant to the PRIVACY ACT 1993, the following is brought to your attention:

- Any personal information may be used to evaluate your application for a Te Whakatōhea Māori Trust Board Grant;
- As a registered member of Te Whakatōhea, this information may also be used to update your membership details;
- The information collected is for the sole use of Te Whakatōhea Māori Trust Board, and is held by Te Whakatōhea Māori Trust Board, PO Box 207, Opotiki; and
- You have the right to access and correct this information subject to the provisions of the Privacy Act 1993.

CHECKLIST:

- Complete all sections of this application
- Tertiary Confirmation Letter of Enrolment
- Copy of Qualification Invoice/Receipt
- Bank Verification
- Signed Declaration
- Photo ID

ACKNOWLEDGEMENT RECEIPT: (Return to applicant)

Applicant Details (Full Name): _____

The Whakatōhea Māori Trust Board has received your:

Completed Application Form Incomplete Application Form (Please contact us on 07 315 6150).

Date: _____