



NGĀTI WHĀTUA ŌRĀKEI

2018 EDUCATION GRANT APPLICATION**Tertiary**

CRITERIA FOR GRANT

To apply for a Ngāti Whātua Ōrākei Grant you must be:

1. Be a Ngāti Whātua Ōrākei registered hapū member.
2. Be enrolled at an educational institute for the year.
3. Submit a completed application form with all required supporting documentation.
4. International grants will need to provide a copy of the school invoice or enrolment confirmation via a school letter.
5. If you are over 18 years of age you will need to fill out your own application form.

IMPORTANT INFORMATION

- Providing an incomplete or inaccurate application will extend the time required to process and pay your grant.
- Incorrect/incomplete bank details will result in the funds being returned and default fees being incurred, which may be deducted from future grants.
- You must advise the NWO Hapū Ora team of any changes to your application via orakeied@ngatiwhatuaorakei.com.
- All applicants (successful and unsuccessful) will be notified in writing within one month from the date the application is made.

CHECKLIST

Please ensure:

- This entire Grant Application Form is complete.
- This applicant has signed and dated this Application Form.
- You attach with this application a document that shows enrolment confirmation, EFT and fees payable.

Once completed, please return your Application to:

Email: orakeied@ngatiwhatuaorakei.com

Post: Hapū ora
Ngāti Whātua Ōrākei - Whai Maia
PO Box 42 045
Ōrākei, AUCKLAND

APPLICANT INFORMATION

Given Name/s: _____ Surname: _____

Gender: _____ Date of Birth: _____ Email Address: _____

F M / /

Postal/physical Address (Circle one):

Number Street Suburb

Town/City Post Code Country

Best Contact Number: _____

Alternative Contact Number: _____

Is the named applicant a registered member of Ngāti Whātua Ōrākei? Yes No

GRANT DETAILS

Which Education grant are you applying for? (Select one)

Training / Vocational Study

Certificate or Diploma

Undergraduate Degree

Post Graduate

Masters

Phd - Doctorate

EDUCATION PROVIDER INFORMATION

Name of Education Provider: _____

Education Provider Contact Number: _____

Education Provider Contact Person (If applicable): _____

Enrolment Option:

- Full-time Part time

What are the key factors you consider when choosing an education provider?

- Offers high quality teaching
 Scholarships
 Family and friends have attended
 It was recommended to me
 High graduate employment rate
 Course offerings
 Other: _____

Was this education provider your first choice? Yes No

Are you happy with the overall quality of the education provider?

- Excellent Okay Needs Improvement Unhappy

EDUCATION AND LEARNING

What is your highest qualification gained to date?

- NCEA L1 NCEA L2 NCEA L3 Cambridge IGCSE
 Cambridge AS Cambridge AS and A2 Certificate Diploma
 Degree Postgraduate Degree Masters Graduate Certificate
 Doctorate Other: _____

Field of Study

- | | |
|---|---|
| <input type="checkbox"/> Te Reo Māori me ngā Tikanga Māori | <input type="checkbox"/> Food |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Environmental and Related Studies | <input type="checkbox"/> Personal Services Health |
| <input type="checkbox"/> Architecture and Building | <input type="checkbox"/> Wellbeing and Social Development |
| <input type="checkbox"/> Creative Arts | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Business and Administration | <input type="checkbox"/> Natural and Physical Sciences |
| <input type="checkbox"/> Education | <input type="checkbox"/> Society |
| <input type="checkbox"/> Engineering and Related Technologies | <input type="checkbox"/> Politics and Culture |
| | Other: _____ |

EDUCATION AND LEARNING CONT...

What year of study will you be completing this year?

- Year 1 Year 2 Year 3 Year 4 Other: _____

What is the full title of your intended Qualification? _____

What is your major? (if applicable) _____

What is your minor? (if applicable) _____

How are you studying?

- Online On Campus Extramural

Is this your first year of tertiary study?

- Ae Kao

Is this your first year of tertiary study? _____

Please list the subjects you are studying in 2018.

SUBJECT

Have you attached a document that shows enrolment confirmation, EFT and fees payable?

- Yes No

TE REO MĀORI

Kei tēhea taumata koe ki te kōrero Māori? What is your level in terms of speaking te reo Māori?

- Matatau - Very well Tino pai - Well Āhua pai - Fairly well
 Kei te ako tonu - Still learning Kaore e taea - Not very well

Kei tēhea taumata koe ki te pānui i te reo Māori? What is your level in terms of reading te reo Māori?

- Matatau - Very well Tino pai - Well Āhua pai - Fairly well
 Kei te ako tonu - Still learning Kaore e taea - Not very well

TE REO MĀORI CONT...

Kei tēhea taumata koe ki te tuhi i te reo Māori? What is your level in terms of writing in te reo Māori?

- Matatau - Very well Tino pai - Well Āhua pai - Fairly well
 Kei te ako tonu - Still learning Kaore e taea - Not very well

Kei tēhea taumata koe ki te mārama ki te reo Māori? What is your level in terms of understanding te reo Māori?

- Matatau - Very well Tino pai - Well Āhua pai - Fairly well
 Kei te ako tonu - Still learning Kaore e taea - Not very well

He aha te taumata o te reo Māori e rere ana i tō kāinga? What is the level of te reo Māori being spoken at your home.

- Ae Kao

He aha ētahi rauemi reo Māori hei āwhina i a koe ki te ako i te reo Māori? What type of te reo Māori resources would support you to learn te reo Māori.

- Books Online (Podcasts & Webinars) Games Apps
 Waiata Print material Wananga Reo Classes
 Kura Reo

I te tau kua hipa, kua mahi koe i ētahi mahi marae? - Over the past year have you and your whanau participated in any marae activities?

- Tangi/funeral Holiday programme
 Wānanga Reo Marae hui
 Kura pō Whānau hui (whānau hui, reunions)
 Trust board hui Kore - None
 Pōwhiri

EXTRA CURRICULAR

What things, other than study, do you enjoy doing in your spare time?

Do you know what you want to do after you complete your qualification?

The hapū is looking for ideas to support whānau in education and would appreciate any ideas you have.

BANK ACCOUNT DETAILS

Payment made to?

My nominated account

Direct to Education Provider

Bank Account Name: _____

Bank Account Number:

Bank	Branch	Account	Suffix
Bank Name:	_____	Payment Reference:	_____

If an international Bank Account please provide (if applicable):

Swift Code/BSB/ABA _____ IBAN: _____

PRIVACY STATEMENT

The Ngāti Whātua Ōrākei Trust Group is committed to protecting your privacy. All personal information (as defined in the Privacy Act 1993) that you provide in your application will be collected, stored and used by Ngāti Whātua Ōrākei Trust Group for purposes in connection with the assessment of your application:

1. the maintenance of whakapapa records, membership and hapū databases, voting register;
2. the functions of the Ngāti Whātua Ōrākei Trust Group;
3. keeping you updated on matters concerning your membership, hapū and the activities of the Ngāti Whātua Ōrākei Trust Group;
4. planning and design of any future services, benefits or goods that Ngāti Whātua Ōrākei Trust Group may choose to provide; and
5. any other purposes that the Ngāti Whātua Ōrākei Trust Group considers beneficial to Ngāti Whātua Ōrākei hapū ("Purposes").

Your personal information may be disclosed to a third party that provides services to Ngāti Whātua Ōrākei Trust Group in alignment with its core functions; and where authorised to by law. That disclosure will only be in connection with one or more of the above Purposes.

To update or correct the personal information concerning this Grant Application or if there are any questions concerning privacy, please contact:

Hapū ora

Ngāti Whātua Ōrākei - Whai Maia

Phone: 0508 NW Orakei or (09) 336 1670

Email: orakeied@ngatiwhatuaorakei.com

DECLARATION

I, the Parent/Grandparent or Guardian, declare that all the above information is true and correct. I understand that any application received by the Ngāti Whātua Ōrākei Trust with incorrect, incomplete or misleading information may be rejected. I have read, and I understand and accept the Privacy Statement. I agree and authorize the Ngāti Whātua Ōrākei Trust Group to collect, use, store and disclose my personal information (as defined in the Privacy Act 1993) for the Purposes set out in the Privacy Statement.

Applicants Name: _____

Applicants Signature: _____ Date: _____