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## WHITI ORA O KAIPARA CHARITABLE TRUST SCHOLARSHIP APPLICATION

## Whiti Ora o Kaipara Scholarship programme supports the educational success of Ngāti Whātua o Kaipara members residing in Aotearoa.

Preference will be given to topics of study that can demonstrate an alignment with the strategic objectives set out in the Ngāti Whātua o Kaipara Rautaki 2018-2050:

- Te Mana o Ngāti Whātua o Kaipara
- Kaitiakitanga
- Commercial Development
- Whānau Ora
- Whānau Development

\*To be eligible, you must be a registered iwi member studying at a Tertiary Institution in Aotearoa.

Section One	Personal details
Section Two	Study plan
Section Three	Work and life experience
Section Four	Personal statement
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Section Six	Declaration

## Scholarship Timetable

The scholarships timetable is scheduled to allow you time to apply as early as possible to receive notification before each semester begins.

Round	Open date	Closing date	Notification		
Round 1	1 May	31 July	31 August		
Round 2	1 December	28 February	31 March		

1. Personal details						
Full Name:	Member Number:					
Phone Number:	Email Address:					
Date of Birth (d-mm-yyyy):	Postal Address:					
Are you a current trustee, director, or staff member of Ngā Maunga Whakahii o Kaipara or any of its entities?  □ Yes □ No	Post Code:					
2. Study Plan						
What is the qualification you are studying for, or intending to undertake? E.g. Course Code AK3453: Bachelor of Māori Development—Māori Media. * Please attach your proof of enrolment to this application form						
Provider/Institute:						

2. Study Plan—Continued							
Start Date:	End Date:	End Date:			Is this full time study?		
				□ Yes	□ No		
***	MCH I ( C	0					
*Have you enrolled yet?	Will you be starti	•		-	st year of study?		
□ Yes □ No	□ Yes	□ No		□ Yes	□ No		
Have you applied for other fund (This includes Whiti Ora Tertiary Gran		□ No If y	yes, record the	provider an	d amount here:		
				\$			
3. Work and life experience							
To give us a greater understand	ing of your qualification	ns and work l	history, please	attach your	Curriculum		
Vitae (CV) noting all employment and	d any voluntary work history	, community in	volvement and rele	evant life expe	eriences.		
4. Personal Statement							
As a descendent of Ngāti Whātu			=				
Scholarship will contribute to th	e wellbeing and future	of you and yo	our whānau, and	d how it ma	y enhance your		
career prospects.  To submit your Personal Statemer	nt·						
a) Type or write your statement (in		och it to this and	dication with the h	eading 'Derec	anal Statement' or		
, , , ,	•			-			
<ul> <li>b) Upload a 3 minute video presenta and password for your video ir</li> </ul>				accessing it.	ora the ORL (link)		
URL:				Password:			
Refer to the Vimeo website to create a	a free account. For help, p	lease go to: ht	tps://vimeo.com/	help.			
5. Iwi Participation							
Please provide details below of					ır past		
and current participation in Ng Note: A referee cannot be your spous	ati Whatua o Kaipara wl e, partner, family member or a	nānau, hapū, trustee, director	and iwi activition or staff member of W	<b>9S.</b> /hiti Ora o Kaip	ara Charitable Trust		
or its related entities. Please se							
Referee name	Relationship	to you:		Contact Nur	mber		
6. Declaration							
By submitting this form, I (the app	licant) agree and declare	that all the info	ormation provided	d is true and	correct.		
<ul> <li>I understand that Whiti Ora o Kaipar school or tertiary provider may share</li> </ul>	,	I agree to from this s		ip monies paid	out if I withdraw early		
<ul> <li>I agree to my information being used marketing purposes</li> </ul>	for reporting and	Privacy Stater Whiti Ora o Kai	<b>nent</b> para Charitable Trus	st uses the info	rmation collected to		
I understand that the terms of this Scholarship can be amended at any time, with suitable notice provided		consider applications and administer successful Grant applicants. Your information (except for your bank account records) is held by Whiti Ora o Kaipara Charitable Trust who may use your information for					
I understand that my application may not be considered if the requirements on this form are not met or are incomplete		research and statistical purposes. You have the right to access your information and request corrections if you believe the information held is inaccurate.					
Applicant's Signature:		•		e (d-mm-yyyy):			
•							
<u> </u>							

Please email your completed application to—grants@kaiparamoana.com