



KAIPARA

WHITI ORA O KAIPARA CHARITABLE TRUST KAI VOUCHER GRANT APPLICATION FORM

Whiti Ora are managing the distribution of Kai Vouchers on behalf of Ngā Maunga Whakahii o Kaipara.

These one-off food vouchers are funded by Auckland Council to support Ngāti Whātua o Kaipara registered members who:

- Are 18+ years old
- Reside in Auckland and Kaipara and,
- Who have been impacted by Covid-19

Section One Personal details

Section Two Grant purpose

Section Three Declaration

Grant Timetable

Kai vouchers are a one-off grant that are subject to availability. Therefore, this offer may end at any time without prior notice.

1. Personal details

Full Name:

Member Number:

Date of Birth (d/mm/yyyy):

Email Address:

Applicants Home Phone Number:

Postal Address:

Applicants Mobile Number:

Post Code:

Please answer all of the following questions below so this application can be considered.

Did you **lose your job** or were your **work hours reduced** as a result of Covid-19?

Yes

No

If yes, have you received **financial or food assistance** elsewhere for hardship?

Yes

No

If no, please visit <https://check.msd.govt.nz/> to check your entitlements

If you lost your job due to Covid-19, **are you still unemployed?**

Yes

No

Please Note

Our standard grant process applies and vouchers are available for pick up or post no sooner than the 24th of every month.

2. Grant Purpose

*Grant Purpose	Supplier	Sum <small>(One-off voucher payment)</small>
Covid-19 Relief Food Voucher	Ngā Maunga Whakahii o Kaipara	\$100.00
How would you like to receive your voucher?	Pick Up <input type="checkbox"/> or Post <input type="checkbox"/>	
Which supermarket voucher would you like	Countdown <input type="checkbox"/> or Pak n Save <input type="checkbox"/>	

IMPORTANT

***To support as many households as possible that are financial impacted by Covid-19, vouchers are -**

- Limited to one voucher per member
- Limited to one voucher per household
(multiple applications from the same address cannot be considered)
- Posted to the applicants address that is recorded on our system
- Available for pick up by the applicant only (you will be emailed when the voucher is ready)
- Available for either Countdown or Pak n Save supermarkets

3. Declaration

By submitting this form, I (the applicant) agree and declare that all the information provided is true and correct.

- I understand that Whiti Ora o Kaipara Charitable Trust and my supplier (Health provider) listed, may share my information
- I agree to my information being used for reporting and marketing purposes
- I understand that the terms of this Grant Programme can be amended at any time, with suitable notice provided
- I understand that I can only apply for this grant category once, each financial year
- I understand that my application will be assessed on merit with priority given to first time applicants in any financial year.
- I declare that the information I have provided in this application is true and correct.

- I understand that my application does not imply automatic entitlement to grants, and that caps are the maximum amount a grant will pay **up to** based on funding available each year.
- I understand that if my address has changed since December 11th 2020, this application maybe reprioritised.

Privacy Statement

Whiti Ora o Kaipara Charitable Trust uses your information collected to consider applications and administer successful Grant applicants

Your information is held by Whiti Ora o Kaipara Charitable Trust who may use your information for research and statistical purposes

You have the right to access your information and request corrections if you believe your information is inaccurate.

Applicants Signature:

Date (d/mm/yyyy):

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

Whiti Ora o Kaipara Charitable Trust
16 Commercial Road, PO Box 41—Helensville 0800
<https://www.kaiparamoana.com>