



TERTIARY STUDY OR CADETSHIP/APPRENTICESHIP GRANT APPLICATION FORM 2021

This application is for: (tick one)

Tertiary study grant

Cadetship or Apprenticeship grant

Applicant Details

Are you a registered member of Ngāti Tama ki Te Tau Ihu? Yes No (please tick one)

**If you are not a registered member you will need to register first, before an education grant can be considered.
Please note that any incomplete application forms will not be accepted by the office.**

Surname: _____ First Name/s: _____

Date of Birth: _____ Male Female (please tick one)

Postal address: _____

Phone: _____ Email: _____

Bank Account Details:

Your Bank: _____ Your Bank Account Name: _____

Your Bank Account Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please send verification of your bank account number ie:

- bank statement
- screen shot from internet banking
- deposit slip (handwritten account numbers on a deposit slip must be stamped/verified by your bank).

Tertiary Study

Course details

Course provider: _____

Name of course: _____

Duration: Start date: _____ Finish date: _____

Tell us more about the course, specific kaupapa/topics you will focus on and your career goals and aspirations.

I have included with this application:

- Proof of enrolment e.g. a letter or fees invoice from the provider.
- If you received a Ngāti Tama Tertiary Grant in 2020, please provide your confirmed results from last year.
- You may also provide supporting information including invoices/receipts in relation to the tertiary study.
- All information that is required to consider this application complete.

Please sign the Declaration below:

- 1) I certify that all of the information supplied in this application is correct.
- 2) I agree that my application will not be accepted if it is incomplete.
- 3) If the grant is approved, I agree to be contacted by Ngāti Tama ki Te Waipounamu Trust and to provide information about my education journey.

Signed: _____ Date: _____

Please either scan/email your application to pouawhina@ngati-tama.iwi.nz or:

Post to:
PO Box 914
Nelson 7040

Deliver to:
Ngāti Tama ki Te Waipounamu Trust Office
74 Waimea Road, Nelson

Cadetship/Apprenticeship

Cadetship/Apprenticeship details

Place of cadetship/apprenticeship: _____

Name of employer: _____

Contact person: _____

Address: _____

Phone: _____

Agreed duration of cadetship/apprenticeship: _____

Tell us more about the course, specific kaupapa/topics you will focus on and your career goals and aspirations.

Is your intended cadetship or apprenticeship a paid position: Yes

No

I have included with this application:

- Proof of cadetship / apprenticeship e.g. a letter from the employer
- You may also provide supporting information including invoices/receipts in relation to this cadetship or apprenticeship.
- All information that is required to consider this application complete.

Please sign the Declaration below:

- 1) I certify that all of the information supplied in this application is true and correct.
- 2) I agree that my application will not be accepted if it is incomplete.
- 3) If the grant is approved, I agree to be contacted by Ngāti Tama ki Te Waipounamu Trust and to provide information about my education journey.

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