

Personal Details

Are you a registered member of Ngāti Tama ki Te Tau Ihu? Yes No (please circle one)
If you are not a registered member you will need to register first before a Tama Tū grant can be approved.

Surname: _____ First Name/s: _____

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

Street Number and Name: _____ Suburb/Town/City: _____

Phone Number: _____ Email: _____

Bank Account Details:

Your Bank: _____ Your Bank Account Name:

Your Bank Account Number:

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Please send verification of your bank account number ie:

- bank statement
- screen shot from internet banking.

Information

What is your reason for applying for a Tama Tū Grant?

How will you use the grant (up to \$300)?

Are there any referees we can contact regarding your application? (e.g. landlord, community leader?)
Please provide their contact details below & we must have your written permission to discuss this application with them:

Please provide supporting information that could assist in consideration of your application including letters, quotes or receipts, outstanding bills, rental arrears etc.

Please remember to attach:

- Verification of your bank account number.
- Supporting letters.
- Quotes or receipts.

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.

Signed: _____ Date: _____

Send your completed application form to:

POST:

PO Box 914
Nelson 7040

EMAIL:

pouawhina@ngati-tama.iwi.nz