

## Eligibility Criteria

Please read the following carefully:

- You need to be a registered whānau member of Ngāti Tama ki Te Tauihu [NT] to apply for this grant.
- You can apply for one subsidy per year, per person.
- Ensure this form is fully completed and all accompanying information attached as requested – Incomplete applications will not be processed.

Send completed applications to [grants@ngati-tama.iwi.nz](mailto:grants@ngati-tama.iwi.nz) or Ngāti Tama ki Te Tauihu, PO Box 914, Nelson 7040

## Applicant Details

Are you a registered member of Ngāti Tama ki Te Tauihu?  Yes  No

*If you are not a registered member, you will need to register first before your application is considered.*

Membership Number: \_\_\_\_\_

Surname: \_\_\_\_\_

First Name/s: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Male  Female  Other: \_\_\_\_\_

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 i.e.:

- Bank statement
- Screen shot from internet banking

# Information

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

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

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

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***\* Please attach any supporting information that could assist your application including letters, quotes, receipts, outstanding bills, rental arrears etc.***

## Remember to attach:

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

## Declaration

- 1) I certify that all the information provided in this application is true and correct.
- 2) I agree that my application will not be accepted if it is incomplete.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_