



Omapere Taraire E & Rangihamama X3A Ahu Whenua Trust

Scholarship Application

TITLE: MR / MRS/ MISS/ MS

APPLICANT FULL NAME: _____

DATE OF BIRTH: _____ **GENDER:** _____

CONTACT NUMBER: _____ **MOBILE:** _____

EMAIL: _____

WHAKAPAPA TO TRUST (AS PER REGISTERED OWNERS LIST): # _____

(Contact Maori Land Court/Office if unsure of the number)

The scholarship fund is awarded on a case by case basis. The funding promotes educational advancement of the Omapere Rangihamama Trust Shareholders and Beneficiaries.

To be eligible for the Education Scholarship fund you must fulfil the following:

- You must be a registered Shareholder or Beneficiary of the Trust.
- **Applications for Scholarships open 1st February each year and close March 31st of the same year.**
- Provide evidence of course enrolment and acceptance.
- Must provide NZ bank account details and bank stamped verified confirmation of the account number from the NZ bank. Payment will be direct-credited to your verified bank account number.
- The distribution of the scholarships is at the discretion of the Board of Trustees and applications will be carefully considered once the Trust is in receipt of a **FULLY** completed application.
- Applications can be submitted via post to PO Box 604, Kaikohe or by email to o.rtrustees@xtra.co.nz

Important:

- If you are successful in being awarded a scholarship, you will not be eligible for another scholarship in the following year.
- If the course intended, as per the application, is not pursued the funds must be returned to the Omapere Rangihamama Trust or evidence of enrolment in another equivalent course commencing at the same time must be provided to the Trust.

EDUCATION DETAILS:

TERTIARY INSTITUTION ENROLLED: _____

QUALIFICATION TO BE OBTAINED: _____

ACADEMIC RECORD:

Name of School/Tertiary Institution/Wananga	Qualification achieved	Year attended

HONOURS AND AWARDS:

LIFE AND WORK EXPERIENCE:

(Attach your CV if you have one)

PERSONAL ASPIRATIONS AND GOALS: (Limit 500 words)

Please provide a statement outlining your personal aspirations, reasons for study, goals and projected outcomes including future career goals, potential work, research and project plans.

If your Personal Aspirations and Goals exceed the space provided please attach further pages with this application and list in accompanying documents.

Whakapapa

Iwi: _____

Hapu: _____

Marae: _____

Matua Tane: _____

Matua Wahine: _____

Matua: _____

Whaea: _____

Referee

Please provide the name and contact details for one referee who can be contacted if necessary to support your application eg. Kaumatua/Kuia, Head of Department, School Principal or Senior Lecturer.

Name: _____

Address: _____

Phone: _____

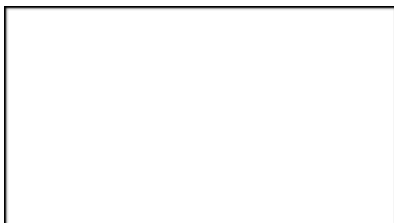
Documents accompanying my Application attached:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

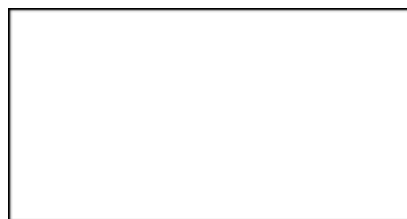
I acknowledge that all the information I have provided is correct and will advise the Omapere Rangihamama Trust should there be any change to the information or reason for requesting funding prior to funds being deposited to my designated bank account.

Signature: _____ Date: _____

Received stamp:



Date Paid:



The Scholarship is awarded-:

Approved: _____
Board Trustee Board Trustee

Dated: _____ Dated: _____

Declined:  Dated: _____

Checklist:

1. Completed the application form fully. ☐
2. Signed and dated the application form. ☐
3. Attached Verified Bank Account details. ☐

Return application to:

Omapere Rangihamama Trust
P O Box 604
Kaikohe 0440

Email: o.rtrustees@xtra.co.nz