



**Wairakei Charitable Trust**  
**WANANGA**  
**APPLICATION FORM 2021**



Organisation Details			
<b>Organisation/Roopu Name</b>			
<b>Contact Person</b>		<b>Designation</b>	
<b>Address</b>			
<b>Phone</b>		<b>Fax</b>	
<b>Email</b>			
<b>What is the legal entity of your organisation/roopu?</b>	<input type="checkbox"/> Not a legal entity	<input type="checkbox"/> Maori Committee	<input type="checkbox"/> Ahu Whenua Trust
	<input type="checkbox"/> Charitable Trust	<input type="checkbox"/> Incorporated Society	<input type="checkbox"/> Maori Trust Board
	<input type="checkbox"/> Marae Entity	<input type="checkbox"/> Whanau Trust	<input type="checkbox"/> Other _____
Wananga Details			
<b>Wananga Name and Date</b>			
<b>Wananga Purpose</b> <small>What will the Wananga cover i.e whakapapa, te reo, weaving etc</small>			
<b>Wananga Location</b> <small>Marae that the Wananga is to be held at. (Please attach a letter from the Marae Secretary confirming booking)</small>			
<b>How many members of your whanau/hapu will be attending the wananga?</b>			
<b>Wananga Team and Experience</b> <small>Please list the key members of your Wananga team and outline their skills and experience.</small>	- - - -		



<p><b>Benefit of the Wananga</b> Briefly describe how the Wananga will benefit the whanau/hapu and future generations.</p>	
<p><b>Support Letters</b> Please attach the following letters to this application</p>	<p><input type="checkbox"/> Meeting minutes or a letter from the Chair of your organisation authorising the Wananga.</p> <p><input type="checkbox"/> Letter from Marae Secretary confirming Marae booking.</p>
<p><b>Have you applied to any other organisations for financial or in kind assistance?</b></p>	<p><input type="checkbox"/> Yes – please list: - - - -</p> <p><input type="checkbox"/> No</p>
<p><b>Is there any further information about your wananga that you wish to include with your application?</b></p>	<p>Please attach additional pages if required.</p>

**Wananga Budget**  
(please attach additional pages if required)

ITEM	Cost(s)	Costs to be covered by:		
		Your Organisation	Other Organisations	WCT
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
•	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Total for Wananga</b>	\$	\$	\$	\$

<b>Total cost(s) of Wananga</b> GST inclusive	Your organisation/roopu contribution	\$
	Financial support from other organisations	\$
	Amount sought from WCT	\$
	<b>Total Cost</b>	\$



## Financial Details

Funding will only be paid into an organisation/roopu recognised bank account.

Please attach a verified bank account statement or deposit slip. The method and timing of payments will be at the discretion of the Wairakei Charitable Trust.

## Checklist

Before submitting your application please check that you have:

- Read the 'Funding Policy' document and be sure that your proposal meets the application criteria.
- Completed all relevant sections in this application form
- Attached written support letters from the relevant committees with a copy of the minutes from the meeting showing resolution to support your wananga.
- Detailed Budget of costs associated with your Wananga.
- Signed this application form (2 people to sign below)
- Attached any other additional information to support this application

### Please send all completed application forms to:

Wairakei Charitable Trust  
PO Box 19  
TURANGI

### All enquiries to be directed to:

Total Diversity Ltd (Secretary)  
Phone: 07 386 6843 or Fax: 07 386 0390  
Email: info@tdltd.co.nz

## Signatures

Two people from your organisation must complete this section. By signing below, each signatory certifies that:

1. The information contained in this application is true and correct.
2. There is no guarantee that the organisation/roopu will be successful in receiving funding.
3. The Wairakei Charitable Trust may collect information about the organisation/roopu from any third parties in respect of this application.
4. The signatories have the authority to commit the organisation to this application.

Name: \_\_\_\_\_ Designation: \_\_\_\_\_

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

Name: \_\_\_\_\_ Designation: \_\_\_\_\_

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

Please ensure that all parts of the application form are completed and supporting documents are attached.

**Incomplete applications will be declined.**

**CLOSING DATE: SATURDAY 31 JULY 2021**

