



**Ngāti Ruanui**

P: 06 278 0148 | F:06 278 1358 | W: www.ruanui.co.nz

**TE RUNANGA  
O NGATI RUANUI TRUST**

**EDUCATION GRANT  
APPLICATION**

This application is to be completed by all Ngati Ruanui registered uri whom are seeking financial support in Secondary, Post Graduate, Undergraduate study or other recognised training.

Completed and approved grants will be paid between the 20<sup>th</sup> and 30<sup>th</sup> of the following month. Please allow 15 working days for processing.

If you have any queries or require assistance, please do not hesitate to call 0800 RUANUI (782684) or email [gml@ruanui.co.nz](mailto:gml@ruanui.co.nz)

**PERSONAL DETAILS**

Ngati Ruanui Registration No:			
First Name:			
Surname:			
Postal Address:			
	Post Code:		
	Country:		
Residential Address: (If different from postal address)			
	Post Code:		
	Country:		
Date of Birth:			
Occupation:			
Phone (mobile):			
Phone (home):			
Email Address:			
Gender:	Male	<input type="checkbox"/>	Female <input type="checkbox"/>

**STUDY DETAILS**

Is this your first year of study?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Type of study (tick one)	Part Time	<input type="checkbox"/>	Full Time	<input type="checkbox"/>
Type of Qualification (tick one)				
	Degree	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
	Certificate	<input type="checkbox"/>	Postgraduate	<input type="checkbox"/>
	Year 9-13	<input type="checkbox"/>	Other	<input type="checkbox"/>
What is the full title of your intended Qualification?				
In what year will you complete your qualification?				

**ENROLMENT CONFIRMATION**

Name of your Education Provider:			
Course Start Date:			
Course End Date:			
Education Provider Address			
	Post Code:		
	Country:		
Phone:			

Please attach enrolment confirmation to your application.

## BANK ACCOUNT DETAILS

Name of Bank:	
Bank Account Holder Name:	
Bank Account Number	

Please provide verification of your bank account (i.e bank deposit slip or written confirmation from the Bank).

## DECLARATION

**Please read each statement and tick the box to indicate it has been completed:**

- All the information I have supplied in this application is true and correct;
- I am registered with Te Runanga o Ngati Ruanui Trust;
- I understand that if my application is not complete, it will not be considered;
- If I am a successful application, I give Te Runanga o Ngati Ruanui Trust consent to publish my name as a recipient on any Ngati Ruanui publication (e.g. Te Pou Korero, website, annual report)
- I am enrolled in study as noted in this application.

**I have attached:**

- Bank account verification
- Enrolment confirmation from Education Provider

Parent / Student Name:

\_\_\_\_\_ (Parent may sign the declaration on behalf of a minor)

Signature:

\_\_\_\_\_

Date:

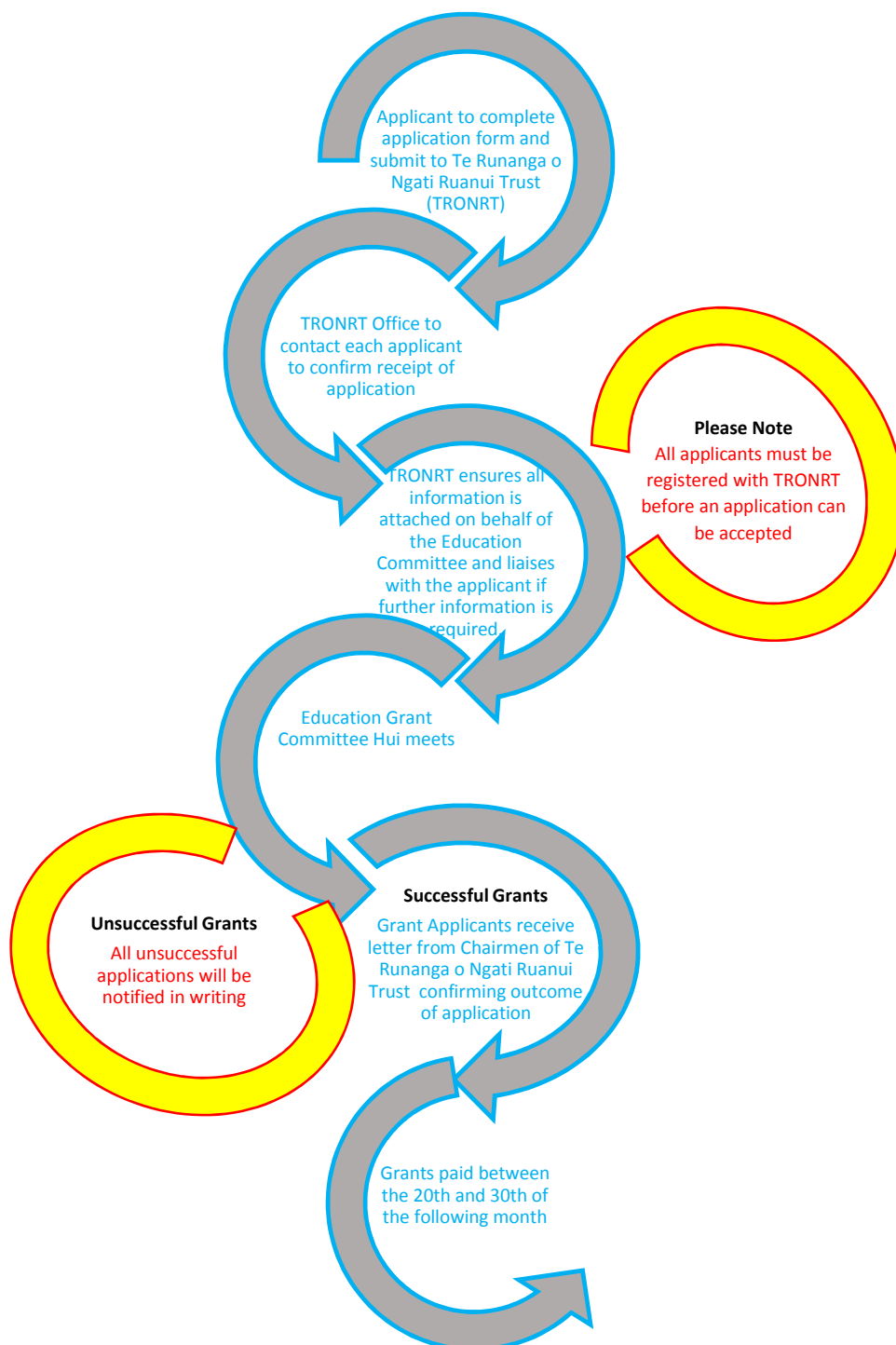
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## HOW TO LODGE THE APPLICATION

Once all areas of the application are completed you can hand deliver, post or email to:

Te Runanga o Ngati Ruanui Trust  
c/- Education Grant Committee  
74 Princes Street, Hawera 4640  
PO Box 594, Hawera 4610  
[gml@ruanui.co.nz](mailto:gml@ruanui.co.nz)

## Application Flow Chart



### Other funding and useful websites are:

Maori Education Trust:

[www.maorieducation.govt.nz](http://www.maorieducation.govt.nz)

Parininihi ki Waitotara:

[www.pkw.co.nz](http://www.pkw.co.nz)

Ministry of Education:

[www.moe.govt.nz](http://www.moe.govt.nz)

Generosity New Zealand

[www.generosity.org.nz](http://www.generosity.org.nz)

FOR OFFICE USE ONLY

<b>DATE RECEIVED:</b>		<b>RECEIVED BY:</b>	
<b>APPLICATION COMPLETED IN FULL:</b>	YES / NO	<b>APPLICANT CONTACTED ON:</b>	
<b>COMMENTS:</b>			
<b>APPLICATION APPROVED:</b>	YES / NO	<b>AMOUNT APPROVED:</b>	
<b>PAYMENT DATE</b>		<b>PAYMENT METHOD:</b>	
<b>EDUCATION COMMITTEE SIGNATURE:</b>			
<b>DATE SIGNED:</b>			