



## ‘TOA TAKITINI’ FUNDING APPLICATION FORM

The purpose of “Toa Takitini” funding is to provide assistance to Te Aupōuri whānau, hapū, and iwi to promote Te Aupōuri well-being, culture and knowledge. There are two funding rounds each year. Applications must be received by TAIDT no later than 5pm on the last Friday of March for the April Assessment Hui, and the last Friday of September for the October Assessment Hui.

**GROUP NAME** \_\_\_\_\_

**GROUP DESCRIPTION** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**POSTAL ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

\_\_\_\_\_ **MOBILE** \_\_\_\_\_

\_\_\_\_\_ **EMAIL** \_\_\_\_\_

### PURPOSE

Briefly explain the purpose of your application.

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**COST**

What is the total cost and how will any funds received be used?

*(Please attach any relevant documentation to verify the cost, and provide a breakdown of the total cost by contribution - if applicable.)*

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Total cost:

- Total contribution from individual participants (if applicable):

- Total contribution from other funding sources:

*(e.g. Sponsors, other grants - if applicable)*

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**TIMELINE**

*(When will the funds be used, provide a start/finish date where applicable?)*

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**IWI STRATEGIC GOALS AND OBJECTIVES**

How does this support the Iwi goals and objectives?

*(For example: Cultural Connection & Whanaungatanga, Language Revitalisation, Places of Cultural & Spiritual Significance, Social Improvement & Relief of Poverty, Culture & Heritage, Economic Advancement & Succession Planning, Wā Kāinga Infrastructure)*

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**NUMBERS BENEFITING**

*(How many people will directly benefit from this activity/event/project. Please fill out the attached nominal roll?)*

Te Aupōuri: \_\_\_\_\_

Other: \_\_\_\_\_

How will they benefit:

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**KEY PERSONNEL**

*(Roles can be performed by one or more individuals. Key personnel may be contacted by TAIDT members for further information)*

Name \_\_\_\_\_ Role \_\_\_\_\_

Postal Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Mobile \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Role \_\_\_\_\_

Postal Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Mobile \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

**SUPPORT**

Please outline the support you have for your application, and provide signed letters of support from Iwi and/or Community or any other relevant people who support your application

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**PLEASE ENSURE YOU HAVE INCLUDED THE FOLLOWING:**

- Completed Application Form
- Any further documents to support your application

- Verification of bank details
- Letter of support

**APPLICANT'S DECLARATION AND AGREEMENT**

I declare that the enclosed information is true and correct.

I agree for my photo, profile and funding details to be published in Te Aupōuri publications and on the website.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

***For Te Aupouri Iwi Development Office Use Only***

Application Received		Acknowledgement Letter Sent	
Reference/Support Letter Received		Photo Received	
Bank Details Received		Other	
Funds Approved		Date Paid	
Successful/Unsuccessful Letter Sent			

### TOA TAKITINI NOMINAL ROLL (List Te Aupōuri Members who will Benefit)

Group Name: \_\_\_\_\_

Full Name (a)	Date of Birth (b)	Te Aupōuri Registration Number (c)

