



YOUR HAPU / IWI DEVELOPMENT ASPIRATIONS

Provide a typed essay of no more than 500 words on what inspired you to select your course of study and what contribution you hope to make to your chosen industry and to Te Rūnanga a Rangitāne o Wairau Trust.

POST TO:

MĀTAURANGA
TE RŪNANGA A RANGITĀNE O WAIRAU TRUST
PO BOX 883
BLENHEIM 7240

OR EMAIL TO:

EDUCATION@RANGITANE.ORG.NZ

CHECKLIST:

- MEMBERSHIP NUMBER
- COMPLETED APPLICATION FORM
- PROOF OF BANK ACCOUNT DETAILS
- PHOTO
- COPY OF OFFICIAL COURSE ENROLMENT & ANTICIPATED EXPENSES
- MOST RECENT COURSE RESULTS
- APPLICATION SUBMITTED BY DUE DATE



YOUR ACADEMIC HISTORY

INSTITUTION	YEAR	SUBJECT	GRADE

YOUR RELEVANT WORK HISTORY, INCLUDING VOLUNTARY WORK

Please provide details of your relevant work history.

ORGANISATION	YEAR	DUTIES/RESPONSIBILITIES

YOUR EDUCATION DETAILS AND ENROLMENT CONFIRMATION

Provide enrolment confirmation and evidence of anticipated expenses from your tertiary institute.

STUDENT ID NUMBER _____

NAME OF TERTIARY INSTITUTE FOR 2020 _____

INTENDED PROGRAMME OF STUDY

CERTIFICATE

DIPLOMA

BACHELOR

MASTERS

DOCTORATE

OTHER

MAJOR SUBJECT(S) _____

YEAR OF STUDY IN 2020

1ST

2ND

3RD

4TH

5TH

OTHER

HOURS OF STUDY IN 2020

FULL-TIME

PART-TIME

OTHER

INTERNSHIP

I would like to be considered for an internship with Te Rūnanga a Rangitāne o Wairau Trust.

YES

NO

DECLARATION

I certify that all information supplied in this application form is correct and true. I know that if the information supplied is incomplete or inaccurate my application will be invalid and declined, without any right of review.

If I am successful I will supply the office with a brief report and photos within 12 weeks of course completion so that my experience/success may be shared with Rangitāne o Wairau whānui.

I consent to this information being used for marketing and communications by Te Rūnanga a Rangitāne o Wairau Trust.

SIGNED _____

DATED DD / MM / YYYY

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