



APPLICATION TO BECOME AN ASSOCIATE IWI AGENCY (AIA)

1. CRITERIA

Any Māori or non-government organisation can become an Associate Iwi Agency (AIA) as long as they can meet all the criteria below;

- 1.1 Maori non-government organisation
- 1.2 Demonstrate Hapū and Iwi support
- 1.3 Represent Tangata Whenua
- 1.4 Accountable to and has the support of the mana whenua of the rohe (region) they operate in
- 1.5 Contributes to the mana motuhake (tino rangatiratanga) of hapū and iwi through its current activities
- 1.6 A Not-for-profit organisation
- 1.7 Formerly constituted structure
- 1.8 Tautoko from two (2) current TKAA Associate Iwi Agencies

2. THE PROCESS

As per 7.2 of the Constitution of Te Korowai Aroha o Aotearoa (TKAA), an Associate Iwi Agency shall become a member of the Society through a resolution unanimously accepted by Komiti Tumuaki. Applications must be made in writing to the Komiti Tumuaki, requesting membership to become an AIA and must be addressed to:

The Komiti Tumuaki (TKAA Governance Board)
Te Korowai Aroha o Aotearoa Inc
PO Box 208
WHAKATANE

RE: APPLICATION FOR MEMBERSHIP

- 2.1 Applicant organisation must attach:
 - Profile of your organisation, which meets all of the criteria above
- 2.2 On the receipt of request for membership TKAA will:
 - Notify you upon receipt of your request
 - Advise whether your organization has met the criteria or whether more information is required

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| APPROVED: Pouārahi | TITLE: AIA Application | REFERENCE: SDM 1.1C |
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2.3 Decision to ratify membership will be made by the Komiti Tumuaki at a quarterly hui of the incorporated society.

2.3.1 Unsuccessful Applicants advised in writing if application is declined

2.3.2 Successful Applicants, AIA membership is ratified through entering into He Kirimana (Memorandum of Understanding)

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| AGENCY DETAILS | | (Section A) | |
|----------------|--|-------------------------------------|--|
| Name | | | |
| Address | | City/Town | |
| PO Box | | City/Town | |
| Phone | | Fax | |
| Cell | | Legal Entity <i>(if applicable)</i> | |
| Website | | Charitable Status | |
| | | | |

| AIA, HAPŪ AND IWI SUPPORT: | | (Section B) | |
|--|----|-------------|--|
| To be completed by your Agency Manager <u>AND</u> a Kaumātua or Hapū/Iwi representative. | | | |
| <i>We support the following organisation application to become an Associate Iwi Agency of Te Korowai Aroha o Aotearoa Inc.</i> | | | |
| Print Name of Applicant Agency Manager/Chairperson: | | | |
| Print Name of Kaumātua or Hapū/Iwi representative: | 1. | | |
| | 2. | | |
| Please Identify the Hapū / Iwi your agency services: | | | |
| 1. Name of Current TKAA AIA - Tautoko: | | | |
| Print Name of Current AIA Manager/Chairperson: | | | |
| Current AIA Manager/Chairperson to Sign: | | | |
| Contact Details: | | | |
| 2. Name of Current TKAA AIA - Tautoko: | | | |
| Print Name of Current AIA Manager/Chairperson: | | | |
| Current AIA Manager/Chairperson to Sign: | | | |
| Contact Details: | | | |
| Applicant Agency Manager/Chairperson to sign: | | | |
| Kaumātua or Hapū/Iwi representative to sign: | | | |

| CONSENT (Section C) | |
|---|--|
| <i>I consent to Te Korowai Aroha o Aotearoa Inc collecting information about me in relation to this application</i> | |
| Print full name: | |
| Sign: | |
| Date: | |

CHECKLIST

Application Form

- CRITERIA** **Eligibility to Apply**
Meets and demonstrates all criteria as noted in 1 Criteria
- Section A:** **COMPLETED - Organisation Details**
- Section B:** **COMPLETED - Hapū & Iwi Support**
- Section C:** **COMPLETED - Consent**

Office Use Only

Actioned by _____ Date: / /

Successful Unsuccessful

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