

TE PAE ARAHI – WHAKATIPU RANGATIRA REGISTRATION FORM

SITE INFORMATION

(Section A)

Wānanga:	TE PAE ARAHI	
Proposed Dates:	Wānanga 1: 26-29 April 2018 Wānanga 2: 25-27 May 2018 Wānanga 3: 28-30 September 2018 Hui a Tau: 6-9 December 2018	<i>Any practicum hours are additional to wānanga and participants will be required to be available</i>

PERSONAL DETAILS – PLEASE USE CAPITAL LETTERS

(Section B)

First Names		Last Name	
Physical Address		Postal Address	
City/Town		City/Town	
Date of Birth		Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Contact Number 1		Contact Number 2	
Email			

WHAKAPAPA

Iwi		Hapū	
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REGISTRATION SUPPORT INFORMATION

(Section C)

Kaiako Support Details			
TKAA Training undertaken and year completed			
Name of Kaiako a Kaupapa who supports this registration			
Is a signed letter of support from the Kaiako a Kaupapa attached to this registration?	YES	NO	
Kaiako Contact Details			
First Names		Last Name	
Physical Address		Postal Address	
City/Town		City/Town	
Contact Number 1		Contact Number 2	
Email			
Whānau, Hapu, Iwi Support Details			
Please advise what mahi you do with your whānau, hapū, iwi (use a separate paper if needed)			
Is a signed letter of support from whanau, hapū, iwi attached to this registration?	YES	NO	
Whānau, Hapu, Iwi Member Contact Details			
First Names		Last Name	
Physical Address		Postal Address	
City/Town		City/Town	
Contact Number 1		Contact Number 2	
Email			

MEDICAL & DIETARY (Section D)

Medical conditions or disabilities	
Dietary requirements	
Do you have any Allergies?	

DOCUMENTATION CHECKLIST (Section E)

The following documentation will need to be submitted to the tari for your application to be considered (please tick ✓):-

	Completed Te Pae Arahi Registration Form
	Copy of Driver's Licence (both sides)
	TKAA Police Vetting Form
	Signed Kaiako Support Letter
	Signed Whānau, Hapu, Iwi Support Letter

Other documentation could be required if you are selected to participate in Te Pae Arahi.

EMERGENCY CONTACT (Section F)

In case of an emergency, please identify a contact person:

First names		Last name	
Address		City/Town	
Contact Number 1		Contact Number 2	
Relationship			

CONSENT (Section G)

DISCLOSURE AND THE PRIVACY ACT 1993

- Akonga have the right, under the Privacy Act 1993, to request access to any information that Te Korowai Aroha o Aotearoa holds about them.
- Information regarding Te Korowai Aroha o Aotearoa training programmes will be used for official and statistical purposes however all identifying features will be removed.
- Due to the unique nature of Te Korowai Aroha o Aotearoa Training Programmes we also require your consent to share akonga certification information with our funders, agencies and/or mana whenua / tangata whenua support.
- Te Korowai Aroha o Aotearoa ensures akonga information is kept secure and confidential whether this comprises personal disclosures or assessment results, in accordance with the Privacy Act 1993 (refer to Akonga Handbook – He mana tō te tanga – Privacy)

I hereby consent to Te Korowai Aroha o Aotearoa Inc. collecting information about me in relation to this training programme and sharing information regarding certification with our funders, agenciesmy agency/organisation. I declare all of the above information is true and correct, I am also aware that Te Korowai Aroha o Aotearoa Inc. may need to seek further clarification in regards to this registration. I have read and understand the information advised in the Akonga Handbook – He mana tō te tanga – Privacy

Signature	
Date	

Please return registration forms via post, fax or email to:

TE KOROWAI AROHA O AOTEAROA, PO Box 208, WHAKATANE 3120
Ph: 07 3080 585 Fax: 07 3080587 Email: sdinfo@tkaa.org.nz