



Applicant Whakapapa (to the Owner in Tuaropaki or to the Tūpuna named in the Whānau Trust Order)

.....
(Ākonga/Student)

.....
(Matua/Father)

.....
(Whaea/Mother)

.....
(Koroua)

.....
(Kuia)

.....
(Koroua)

.....
(Kuia)

.....
(Koroua/Kuia Tuarua)

.....
(Koroua/Kuia Tuarua)

Owner/Trustee Details

Full Name:

Address:

..... Post Code:

Phone: Mobile:

Email Address:

Both the applicant and the owner/trustee endorsing the application must sign this page

Student Name: Owner/Trustee Name:

Student Signature: Owner/Trustee Signature: Sign by hand in pen

Date: Date:

This application needs to be endorsed by the current living owner or a Trustee of a Whānau Trust in the Tuaropaki Trust.

By signing this agreement, you as the owner or trustee agree to the following:

- I endorse the applicant seeking a Secondary Grant from Tuaropaki Trust for the duration of their studies commencing in 2026
- I confirm the attached whakapapa
- I confirm the applicant has demonstrated to my reasonable satisfaction that s/he has obtained permission from the relevant whānau member(s) to submit their birth certificate(s) to Tuaropaki Trust as evidence of their whakapapa for this and any future applications.
- I understand that I must be fully registered* with the Trust for my endorsement to be accepted (*your current contact details, ID and bank account are recorded in our database)
- I give my consent for Tuaropaki to publish my name as the one endorsing the applicant in any Tuaropaki publication.