

# Māori and Pasifika Trades Training

## Tools Grant Application Form



Before completing this form, please read the Māori and Pasifika Trades Training (MPTT) Tools Grant Information for Applicants sheet carefully. Send your completed application to the tertiary education organisation (TEO) managing tools grant applications for your MPTT consortium. Incomplete applications will not be processed.

### New Zealand Apprentice/Apprentice-equivalent trainee to complete this section

Full Name: \_\_\_\_\_

National Student Number: \_\_\_\_\_

ITO Student Number (if applicable): \_\_\_\_\_

New Zealand Apprenticeship/Training Start Date (dd/mm/yyyy): \_\_\_\_\_

Are you a New Zealand Apprentice (NZA)? **Yes** **No**

Or do you meet the eligibility criteria for an apprentice-equivalent trainee as set out in the MPTT Tools Grant Information for Applicants. **Yes** **No**

**Note: If you are an apprentice-equivalent trainee, your employer and the TEO at which you are enrolled must complete the declaration on page 2.**

ITO/TEO enrolled with: \_\_\_\_\_

Qualification: \_\_\_\_\_

MPTT Consortium that you are a part of: \_\_\_\_\_

NZA/Trainee Bank Account (Please attach deposit slip or other verification of bank account number):

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank	Branch			Account Number						Suffix (2 or 3 digits)				

I, (Print name) \_\_\_\_\_

(the NZA/apprentice-equivalent trainee) am applying for a MPTT Tools Grant. In applying for this grant, I declare as follows:

- I have read the eligibility criteria set out in the MPTT Tools Grant Information for Applicants on TEC's website and am eligible to apply;
- I have not received any other Government funding for the costs of tools to my training or apprenticeship (including the Apprentice Reboot );
- I acknowledge that the lead TEO in my consortium will apply for and receive the MPTT tools grant payment on my behalf;
- I acknowledge that this grant is to help cover the cost tools related to my training and can only be used for this;
- I have read the Privacy Statement below and consent to the use of personal information as described in it; and
- All the information I have supplied on this application form is true and complete.

Signed: \_\_\_\_\_ Dated (dd/mm/yyyy): \_\_\_\_\_

### Privacy Statement

Pursuant to the Privacy Act 1993, the following is brought to your attention:

This application form collects personal information about you (Information) so that the TEO can assess your eligibility for the MPTT Tools Grant and administer the MPTT Tools Grants. The intended recipients of the information are the TEO in your MPTT Consortium contracted to manage the MPTT Tools Grant applications (TEO) and the TEC. The information will be collected by the TEO. (Continued over page)

You have rights of access to, and correction of, personal information held by the TEO. The TEO will endeavour to ensure that the information held is accurate. Accordingly, please advise the TEO of any changes in your personal contact details as soon as possible.

**Authorisation**

By completing the application form, you authorise:

- i) the TEO to obtain, use and disclose any and all information held by the TEO to the TEC and any other party that is authorised by you from time to time for the purposes set out above;
- ii) the release to the TEO or the TEC of any information held by your employer and the TEO delivering your qualification (including if an ITO) for the purposes set out above;
- iii) the TEC to hold your personal information on its systems and use your personal information for the purposes set out above.

You understand that the information provided by you in the application form will enable TEC to assess your application for a MPTT Tools Grant. As such, you confirm that all information provided to the TEO in connection with the application is complete, true and accurate, no information has been omitted or withheld which would cause any information given to be misleading or incomplete in any material respect and acknowledge that failure to provide or supply of inaccurate information may result in the grant being refused.

**Do you accept the Privacy Statement and Authorisation? Yes/No (Please circle one)**

***Employer to complete this section – only complete for apprentice-equivalent trainees***

Name of employer: \_\_\_\_\_

Industry type: \_\_\_\_\_

Employer contact details: \_\_\_\_\_

I, (Print name) \_\_\_\_\_

confirm that the trainee is employed by me and I have an arrangement with the trainee and their TEO to complete the trades qualification listed over page.

Signed: \_\_\_\_\_ Dated (dd/mm/yyyy): \_\_\_\_\_

***TEO delivering qualification to complete this section – only complete for apprentice-equivalent trainees***

TEO name and EDUMIS: \_\_\_\_\_

I, (print name) \_\_\_\_\_

confirm that the trainee is enrolled at this TEO and I have a training arrangement with the trainee and their employer to complete the trades qualification listed over page.

Signed: \_\_\_\_\_ Dated (dd/mm/yyyy): \_\_\_\_\_

***TEO managing tools grant applications for MPTT consortium to complete this section***

EDUMIS number: \_\_\_\_\_

Check that:

- All sections of the application have been completed.
- The NZA/Trainee is eligible for the MPTT Tools Grant.
- ITO Student Identifier (NZAs) or NSN (trainees):

Applicant eligible for payment date (dd/mm/yyyy): \_\_\_\_\_

Signed: \_\_\_\_\_ Dated (dd/mm/yyyy): \_\_\_\_\_