



TIROA TE HAPE CHARITABLE TRUST

Questionnaire/Application



If you require support during the Covid-19 pandemic, please complete the below and return by post or email:

**** Please note only one form to be completed per Shareholder / Whanau Trust ****

**** Approval of your application will be at the sole discretion of the Trustees ****

**** Amounts payable are subject to approval and criteria ****

Applicant Details

Name _____

Contact Phone Number _____

Address _____

Email Address _____

Gender

Male

Female

Age

0 – 20

21 – 40

41 – 60

60+

Are you a Shareholder in

Tiroa E Trust

Te Hape B Trust

Both

Has the Covid-19 pandemic reduced your normal household income Yes No

If yes, please give a brief explanation _____

What types of support would help your current situation

Medical

Food

(Please attach proof of hardship)

Utility Bills

Travel

Rent

Mortgage

Other (please specify below)

Have you received any other support from any other agencies Yes No

If yes, please specify who from and what form of support _____

Please note: This may not mean that your eligibility will be influenced.

Please email or post your completed form no later than Friday 29

May 2020 to: sharon@tiroatehape.maori.nz

Tiroa Te Hape Charitable Trust

PO Box 51

TE KUITI

Thank you!

Kia mau ki a koe me te whanau (take care of yourself and whanau)

Please add any further comments below:

