



# Nomination Form

## Māori Youth Council

Title ..... First Name(s) .....

Surname .....

Date of Birth ..... Gender .....

Iwi and/or iwi affiliations .....

Home/Postal address

**Please include a current CV with your application** including educational qualifications and work history where applicable.

**Why do you want to be on the Māori Youth Council?**

**Tell us about the special skills, experiences and attributes you can bring to the Māori Youth Council.**

**What other commitments do you have? (e.g. sport, other groups) How often do they meet?**

**Is there any other information you would like to share with us?**

**Referees:** Please provide the names and contact details of 2 referees.

**Conflicts of interest:** Please advise any actual or potential financial, professional or personal conflicts of interest you may have if you are appointed as a member of the Māori Youth Council.

- |   |     |                          |    |                          |
|---|-----|--------------------------|----|--------------------------|
| • Have you looked at the terms of reference?                        | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| • Do you understand what the purpose of the Māori Youth Council is? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| • Will you be available for the Māori Youth Council meetings?       | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| • Have you included a copy of your CV with this application form?   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

**Privacy Statement**

The information provided in this form and any other material provided to Te Puni Kōkiri will be used only to determine the nominee’s suitability for consideration for appointment to the Māori Youth Council.

**Authority and Declaration**

*This authorises Te Puni Kōkiri and the New Zealand Police to make various enquiries in New Zealand and overseas, to verify or add to the information you have provided or which has been gathered about you, and to obtain information from various organisations such as courts, employers, educational institutions, Government agencies, and your referees in New Zealand and overseas. The provisions of the Criminal Records (Clean Slate) Act 2004 apply to this authorisation.*

I hereby authorise the Chief Executive of Te Puni Kōkiri, or the New Zealand Police to make or cause to be made, in New Zealand or elsewhere, whatever enquiries are considered appropriate to verify or add to the information provided by me, or concerning me, and authorise such enquiries to be made before an appointment to the Rangatahi Youth Council.

I hereby authorise and request all Courts, Police, Service Boards, Employers, Educational Institutions, Banks and other Financial Institutions and all Government Agencies both foreign and domestic, and any other body or person to whom this authority may be presented to allow any accredited representative of Te Puni Kōkiri or of the New Zealand Police to inspect and obtain copies of any or all documents and records relating to me (either solely or jointly with any other person) and to provide that representative with all information relating to me which may be requested in the course of the enquiries described above, for the purpose of determining my suitability to be appointed to the Māori Youth Council.

I hereby give my permission to add my details to a Māori youth database administered by Te Puni Kōkiri.

I authorise the named referees to disclose information to Te Puni Kōkiri relevant to the consideration of my appointment to the Māori Youth Council. I understand that the information received by Te Puni Kōkiri is supplied in confidence as evaluative material and will not be disclosed to me.

I have completed all sections of the application form and the information supplied in this application is correct. I understand that providing incorrect, incomplete or misleading information will render this application invalid and may result in the revocation of any appointment made in reliance of such information.

Signature: Enter your name here as a signature Date: Enter the date here

**(Important Note: The inclusion of your name in the “signed” area above will be deemed to confirm the above authorisation and declaration)**