



# HWNZ Hauora Māori Training Fund

**Closing date is: 18 November 2011**

**BAY OF PLENTY** To ensure all applications have equal opportunities of consideration for HWNZ HM funding to undertake study, the following information must be supplied. **YOU MUST ANSWER ALL QUESTIONS.** Incomplete forms will be returned to the applicant without consideration. All successful applicants will be notified by mid December.

## APPLICATION FORM 2012

<b>1. Personal Details</b>	First Name (Legal name):			
	Surname (Legal name):			
	Date Of Birth:			
	Provider Organisation Name:			
	Work Phone:			
	Home Phone:			
	Residential Address:			
	Cell Phone:			
	Email (Work or Home):			
	Total Hours Worked Per Week			
<b>2. New Zealand Residency Status</b>	YES		NO	
<b>3. Ethnicity (Circle)</b>	NZ Maori	New Zealander	Pacific Island	Other
	Iwi Name(s):			
<b>4. Links / Whakapapa</b>	Hapū Name(s):			
<b>5. Personal Career Plan</b>	Refer pgs 4-6, have you completed and supplied a Personal Career Plan to support this application?			
	YES		NO	
<b>6. Level of Qualification</b>	Circle (below) the <b>level of qualification</b> for which you are seeking support			
	CERTIFICATE	GRADUATE CERTIFICATE	DIPLOMA	
<b>7. Priority Health Area</b>	Circle (below) the <b>priority health area</b> for which you are seeking support			
	AGED CARE	REHABILITATION	PRIMARY CARE	

**8. Training Institute & Papers Planned**

SEMESTER ONE - 2012		
Name of Training Institute	Code of Paper	Full Title of Paper(s)
When this/these papers are completed will you have completed the qualification sought?	YES	NO
If No, does your "Career Plan" identify further study?	YES	NO
9. Travel Will you be required to travel to attend any classes as part of these papers?	YES	NO
10. Distances If Yes, what is the total distance to travel in kilometres?	_____ kms	
11. Accommodation If travelling out of town will you require accommodation?	YES	NO
12. Nights If Yes, what is the total number of nights required for related accommodation?	_____ nights	

**13. Training Institute & Papers Planned**

SEMESTER TWO - 2012		
Name of Training Institute	Code of Paper	Full Title of Paper(s)
When this/these papers are completed will you have completed the qualification sought?	YES	NO
If No, does your "Career Plan" identify further study?	YES	NO
14. Travel Will you be required to travel to attend any classes as part of these papers?	YES	NO
15. Distances If Yes, what is the total distance to travel in kilometres?	_____ kms	
16. Accommodation If travelling out of town will you require accommodation?	YES	NO
17. Nights If Yes, what is the total number of nights required for accommodation?	_____ nights	

## AGREEMENT SIGNATURES

(Please obtain ALL relevant signatures)

### Line Manager 'Agreement'

In signing this Application, I confirm that I have had a discussion with the applicant about their Professional Development and Career Plan and I support them in undertaking the above study and submitting this application for funding.

I have also considered the rostering implications particularly the needs of any 'clinical' areas.

Name

Signature

Date

### Organisational CEO / General Manager 'Agreement'

I fully support and endorse this application for funding.

Name

Signature

Date

### Trainee 'Agreement'

Name

Signature

Date

## PERSONAL CAREER PLAN 2012

<b>Personal Details</b>	Full Name	
	Current Position	
	Employer Organisation Name	
	Date	

<b>Part 1: Know Myself</b>	<p>The first step in planning my career is to evaluate and understand my personal aspirations; what are my strengths; interests; drivers and other influences?</p> <ul style="list-style-type: none"> <li>• Check out online resources at: <a href="http://www.careers.govt.nz">www.careers.govt.nz</a></li> <li>• For an objective assessment, I can seek guidance from others as well</li> <li>• At a minimum, I might have a discussion about my career aspirations, strengths and development needs during a performance review</li> </ul>
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<b>The people I have discussed my career with?</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> My manager</li> <li><input type="checkbox"/> My Kaumātua</li> <li><input type="checkbox"/> My current tutor (at wānanga or tertiary institution)</li> <li><input type="checkbox"/> The CTAHM Supervisor &amp; Mentor</li> <li><input type="checkbox"/> A professional leader</li> <li><input type="checkbox"/> A professional / clinical supervisor</li> <li><input type="checkbox"/> An educator</li> <li><input type="checkbox"/> A career development professional</li> <li><input type="checkbox"/> Other (please state)</li> </ul>
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<b>Part 2: Explore Possibilities</b>	<p>I have researched what is available and attractive to me. I have considered my self-assessment outcomes (from above) and my future health workforce needs.</p>
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<b>Career Pathway Option One:</b> <i>Write it here:</i>	<p><b>What are the pre-requisites and requirements to achieve Option 1:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Qualification</li> <li><input type="checkbox"/> Previous Learning</li> <li><input type="checkbox"/> Experience</li> <li><input type="checkbox"/> Papers</li> </ul> <p>Other (please state)</p>
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**Career Pathway  
Option Two:**  
*Write it here:*

**What are the pre-requisites and requirements to achieve Option 2:**

- Qualification
- Previous Learning
- Experience
- Papers

Other (please state):

**Career Pathway  
Option Three:**  
*Write it here:*

**What are the pre-requisites and requirements to achieve Option 3:**

- Qualification
- Previous Learning
- Experience
- Papers

Other (please state):

**Part 3: Making  
Choices**

I have thought about how each option suits me and I have decided (with the assistance of the person I regularly report to), the best match for my goals and workforce needs.

Before making the decision, I thought about:

- What are the perceived barriers / obstacles and how can I overcome them
- My other commitments, outside of work; and
- The level of involvement that will be required

So, which of my options responds best to my employer and my workforce needs?

- Based on the choice(s) I have made, these are my goal(s) described below. My aim is to make each goal as "specific" as possible.

**Goal One**

*Write it here:*

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**What I need to be  
able to achieve  
Goal 1?**

*Write it here:*

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**Goal Two**

*Write it here:*

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**What I need to be  
able to achieve  
Goal 2?**

*Write it here:*

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**Goal Three**

*Write it here:*

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**What is needed to  
able to achieve  
Goal 3?**

*Write it here:*

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**Part 4: Make It  
Happen**

- In order to achieve my goals I need to have an agreed course of action.
- My manager and I need to have a clear understanding of what steps I will be taking, the commitment needed by both myself and my manager and the relevant timeframes.
- I submit BELOW, for your consideration My Career Plan.

**MY CAREER PLAN**

Start Date	Completion Date	Goal Skill/Experience/Knowledge To Be Gained	Activity How Will This Be Gained? e.g. On The Job Experiences; Seminars; CTA-Funded Study; Other-Funded Study	Source of Training Provider e.g. Wananga; Kuratini; University; Polytech; PTE

**Review Date**

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**Line Manager  
Signature**

**Name**

**Signature**

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**Trainee  
Signature**

**Name**

**Signature**

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**Return completed HWNZ Application Form and Career Plan together!!**