

*Waikato Graduate Women Educational Trust*

P O Box 148  
HAMILTON

email: [wqwawards@gmail.com](mailto:wqwawards@gmail.com)

**Te Raranga Matauranga Award**

**Nomination form: two nominations permitted per School / Faculty**

(Note: consideration for this award is by nomination by School or Faculty of the University of Waikato only)

**Closing Date: 30 April**

**School / Faculty:** .....

**Name of nominee:** .....  
Family name First names

**Iwi affiliation (if known):** .....

**Address:** .....

**Email address:** .....

**Degree nominee is enrolled for as a fulltime student:** .....

**Major subject / special programme:** .....

**First support if applicable:** .....

**Courses with Maori content:** .....

I ..... of ..... School / Faculty .....

confirm that the above-named student is one of no more than two nominees of this School / Faculty for a Te Raranga Matauranga Award for 2016.

I confirm that this nominee is enrolled as a full time student in the final year of her first bachelor's degree.

**Academic record / history attached**

Signed: .....  
Dean or Dean's representative

**Student agreement to nomination**

I ..... **agree to be nominated by**  
**the School / Faculty of** .....

for a Te Raranga Matauranga Award for 2016.

I agree to my personal and academic details being considered by the Awards Committee of Waikato Graduate Women Educational Trust in relation to my nomination for a Te Raranga Matauranga Award for 2016.

Signed: .....  
Student nominee