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| **Te Karahipi Wheako Taiao – Outward Bound Scholarship** | | | | | |
| **Nominee information**  Details of the young person being nominated | | | | | |
| Preferred name: |  | | Date of birth: | |  |
| Legal first name(s): |  | | Legal surname*:* | |  |
| Pronouns: | *What words does the young person like to use when not using their name, such as; him/he, she/her, they/them, ia/tāne/wāhine* | | Gender: | |  |
| Ethnicity: |  | | Iwi: | |  |
| Legal status under the Oranga Tamariki Act 1989: | *E.g., Section 101, discharged* | | | | |
| Caregiver’s name: |  | | | | |
| **Nominator information**  **Details of the person making the nomination** | | | | | |
| Surname: |  | | First Name: | |  |
| Organisation or site: |  | | | | |
| Site address |  | | | | |
| Relationship to young person: |  | | | | |
| Contact Number: |  | Contact email address: | |  | |
| **Outward Bound specific questions**  **These are questions provided by Outward Bound to understand the situation and suitability of the young person** | | | | | |
| **Fitness:**  Can this young person comfortably run 3km in under 25 minutes and complete a full day’s activity?  **Yes  No** | | | | | |
| **Water confidence:**  Is this young person confident in water and comfortable putting their head under water?  **Yes  No** | | | | | |
| **Smoking & vaping:**  Does this young person smoke or vape? **Yes  No**  Would they be willing to go smokefree at Outward Bound? **Yes  No** | | | | | |

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| **Criminal record:**  Does this young person have any charges pending, convictions, or have ever had any involvement with Youth Court?  **Yes  No**  If yes, please provide details of convictions, charges, sentences, and dates: | | | |
| **Health & Wellbeing:**  Is this young person affected by any of the following?  Neurodiversity (Autism spectrum disorder (ASD), ADHD, dyslexia etc.  Disability (hearing/vision/intellectual/physical)  Diabetes  Serious illness/major operations/knocked unconscious in the last year  Epilepsy  Allergy to bees, wasps, or peanuts  Treatment/counselling for alcohol or drug use  Other | | | |
| **Additional requirements** | | | |
| **Support person**  Should this young person be selected as a recipient, they will need someone to assist with planning and booking the Outward Bound scholarship i.e. social worker, Kaiwhakamana/youth advocate, caregiver etc.  Please provide the details for this support person below: | | | |
| Full name: |  | Relationship to young person: |  |
| Contact number: |  | Contact email address: |  |
| **Travel:**  Should this young person be selected as a recipient, travel arrangements to get to and from the course start/end point in Picton will need to be made independently. This is something your local Oranga Tamariki office may be able to assist with. Please find more information [here](https://www.orangatamariki.govt.nz/assets/Uploads/Children-in-our-care/Prime-Ministers-Oranga-Tamariki-Awards/Files-imbedded-in-PMOT-nomination-form/Travel-Info.pdf).  **Gear:**  Should this young person be selected as a recipient, some specific gear is required for the course. Please find the gear list [here](https://www.orangatamariki.govt.nz/assets/Uploads/Children-in-our-care/Prime-Ministers-Oranga-Tamariki-Awards/Files-imbedded-in-PMOT-nomination-form/Gear-List-21-day.pdf).  Outward Bound provides all the specialist outdoor equipment and can also lend students waterproof clothing, tramping boots, thermals, gloves and beanies. | | | |

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| **About the young person** |
| **How has the young person been involved in making this nomination? (150 words)**  We ask that you to involve the young person in this nomination. Examples of contributions you may like to mention include: gathering references, photos, making a video, finding copies of certificates etc. |
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| **Tell us about why this young person wants to do Outward Bound?**  What interested them in this opportunity? What are they hoping to achieve from it? |
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| **What would the young person like us to know about their care journey so far? (150 words)**  Please do not include personal information of anyone other than the nominee*.* |
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| **Tell us about the key support networks for the young person (150 words)**  These could include whānau, friends, lawyer, counsellor, teachers and volunteers, organisations, people in the community. |
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| **Why** **should this young person should receive a Prime Minister’s Oranga Tamariki Award? (200 words)**  You are welcome to be as aspirational as you can in this section: please outline in detail why you believe this young person is amazing, and why they should receive an award in the specific category you selected above.  In addition to the written summaries below, please provide supporting material if you can – this might include photos, videos, quotes from the young person etc. |
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| **What are the young person’s strengths?** **(200 words)** How have they contributed to their community? What significant achievements are they proud of? |
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| **What are their hopes and dreams for the future, and how will this Outward Bound scholarship help achieve them? (200 words)** This might include career or study goals, personal goals, recognition in a sport or creative field, leadership goals etc. |
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| **Will the nominee be able to undertake the scholarship in the coming year?** |
| Yes  No |
| **Please list attached supporting documentation**  Documents to support the story of the young person can be a strong part of the nomination and help to demonstrate talents and skills. These might include photos, videos, or stories; artwork or writing by the young person; reference letters from key supporters or certificates of achievement. |
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| **Does the young person understand and consent to:** |
| You submitting their nomination? **Yes  No**  The information you have provided being reviewed by a selection panel including representatives from Oranga Tamariki, our sponsor organisations and VOYCE Whakarongo Mai? **Yes  No**  Their information being kept confidential after the selection process? **Yes  No**  Selected information from a background check (including history of care, criminal convictions and youth justice involvement) being shared with the panel as part of the selection process? **Yes  No** |

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| **Review** | | |
| **Confirmation statements** | | |
| I confirm this entry meets the Awards eligibility criteria and the nominee is:  Aged between 15-21 years  Currently in care (either with Oranga Tamariki, or with an iwi or NGO provider) OR,  In care within the last five years? Yes  No ☐  I confirm this entry is a true and accurate record | | |
| **Site Manager Approval (Oranga Tamariki applications only)**  I       confirm that I have read this nomination and have checked that the young person is eligible for this award, and I formally approve the nomination to be submitted for a Prime Minister’s Oranga Tamariki Award. | | |
| Signed: | Date: | Approved: |
| **The final date for submission is Friday 5 August 2022.**  Please email your nomination along with copies of any supporting documentation to:  **PrimeMinistersAwards@ot.govt.nz** | | |

**Thank you for nominating a special young person for the 2022 Prime Minister’s Oranga Tamariki Awards.**