

Whakatū Te Korowai Manaakitanga Trust Referral Form



Whakatū Te Korowai Manaakitanga Trust provides a range of social services to support the needs of primarily Māori whānau living across the Nelson region. We do accept non-Māori referrals and will contact you to discuss this further.

Who is this referral for?
Self-referral (referring yourself or your whānau) External Agency referral (referring a client)
If you are an External Agency please fill in the below details. If you are doing a self-referral please skip to the next page.
Your Full Name:
Your Organisation:
Your Preferred Contact Number:
Your Email Address:
Your Physical Address:
Is the Client Aware Of This Referral?
Yes No
Has The Client Consented To Be Contacted By Us?
Yes No



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Client Details

If you are doing a self-referral this is where you put your information. If you are doing an external agency referral please put your client details here.

Full Name:		
Date Of Birth:	Gender/ How You Identify:	
	Male Female Other	
Ethnicity:		
Māori NZ/European/Pakeha Other		
Preferred Contact Number:		
Email Address:		
Physical/ Home Address:		
Services Needed		
This last section briefly covers how we can help you	•	
kaimahi	/ STATT.	
Please Tick The Services You Are Needing:		
Whānau Ora Navigator / Family Wellness	Whānau Kaimahi-a-Iwi / Social Work	
Mokopuna Ora / Child Wellness	Fetal Alcohol Spectrum Disorder Navigator	
Mahere Pūtea / Budgeting	Superskills / Kaumātua	
Maara Kai	Kaupapa Huarahi / Street Initiative	