

CONSENT FORM TO TAKE PART IN HŌKAI TAPUWĀE KŌRERO

THE INFORMATION WILL BE USED FOR THE PURPOSE OF HŌKAI TAPUWĀE ONLY

I, _____ agree that Ara Poutama Aotearoa / the Department of Corrections can refer me for the Hōkai Tapuwāe kaupapa Māori kōrero. I understand that I'll talk to a person from a community-based Māori provider, that identifies strongly with their Māori culture, and they will help me identify my cultural strengths and connections. I understand a report will be written by that person which will help other people understand me and my culture better.

This report will be seen by the Judge, my lawyer, and people who work for Ara Poutama Aotearoa who may support me when I'm sentenced.

I acknowledge and consent that the information in the report may:

- Help provide the Judge a balanced view at the time of my sentencing;
- Help the way a probation officer or case manager support me to strengthen my tikanga Māori;
- May assist other staff at Ara Poutama Aotearoa to support me through my rehabilitation and reintegration pathways;
- Help provide a balanced view to the New Zealand Parole Board when making any future decisions (where applicable).

I acknowledge and consent to:

- The kōrero being recorded by the provider and understand that any recording will be deleted when the report has been written.

I am aware that:

- I can withdraw my consent at any time if this kaupapa isn't working for me;
- I can stop engagement at any stage with no negative impacts to any future decisions made about me;
- I will receive a copy of this report and can choose to share it with anyone;
- If I have questions about this consent form or want to withdraw my consent, I can talk to my lawyer;
- My information will be collected, used, shared, and stored securely in accordance with the Privacy Act 2020

Name		Date	
Signature			
If unable to obtain person's signature, but verbal consent obtained, tick here		<input type="checkbox"/>	

The information you give here will help the provider prepare for the kōrero

Your Māori connection

Do you identify as Māori? (Those who identify as Cook Island Māori are not eligible)	Please tick: YES <input type="checkbox"/> NO <input type="checkbox"/>
What is your hapū? (If known)	
What is your iwi? (If known)	

How to contact you?

Phone number	
Email address	
What is the best time / day to call to organise the hui?	
Lawyer's details	

Where are you living?

If you're living in the community – what district are you in?	
If you're in prison – what prison are you in?	

Who are your support people?

Name	Name
Relationship to you	Relationship to you
Contact details	Contact details

Next Court date

When is your next court date?	
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