

## Welcome / Nau mai

### Information about the residency

The Tūpuna Maunga Authority has partnered with the Michael King Writers Centre (MKWC) to fund two two-week residencies at the Michael King Writers Centre, based in the historic Signalman's House on Takarunga / Mount Victoria.

The Tūpuna Maunga Authority Residency is open to individuals working on projects about or that relate to the Tūpuna Maunga. Projects can be both new and ongoing, and from a wide range of fields, such as creative arts, literature, social sciences, and applied sciences.

Applicants to the Tūpuna Maunga Authority Research Scholarship are encouraged to apply. Applications can be written in both Te Reo Māori and English.

#### **Timeframe**

- Applications open on 29 June 2026 and close at 11:59pm, 30 August 2026.

#### **Who is eligible?**

- You must be a New Zealand citizen or permanent resident.
- Projects must relate to the Tūpuna Maunga.

#### **What is included in the residency**

- Accommodation at the Michael King Writer's Centre for two weeks (dates flexible)
- A stipend paid at living wage for two weeks (\$1200 per week)

#### **Applications must consider**

- The value of the project to the Tūpuna Maunga (all projects should aim to enhance the mana and wellbeing of the maunga)
- How mana whenua are included or considered in this project, or how this project is beneficial to mana whenua.

#### **Expectations**

- All residency recipients to follow any terms and conditions set by the Michael King Writers Centre during the residency period.
- Complete an end of stay report following the conclusion of the residency

If you are a successful applicant for this residency, you will be granted a permit that outlines the conditions you will be required to meet.

All residency applications must be submitted via the online application form.

Contact the [TMA permit coordinator](#) if you need advice on your application.

For more information, read the [Information Sheet](#) and [FAQs](#).

For more funded opportunities, go to the [Tūpuna Maunga Authority website](#)

## Applicant details

\* indicates a required field

# TMA Residency Programme

## Form Preview

### **Applicant \***

First Name

Last Name

### **Email \***

### **Phone number \***

Must be a New Zealand phone number.

### **Iwi affiliations (if any)**

## Project details / Ngā pārongo mahinga

\* indicates a required field

### **Project title \***

### **Please outline your project \***

Word count:

Must be no more than 500 words.

### **What expertise do you have in undertaking similar projects? E.g. training, certification, experience \***

### **In what ways would a supported two week residency help achieve the successful realisation of your project? \***

# TMA Residency Programme

## Form Preview

### Maunga relevant to your project \*

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Maungakiekie / One Tree Hill | <input type="checkbox"/> Ōhūiarangi / Pigeon Mountain                    | <input type="checkbox"/> Takarunga / Mount Victoria                          |
| <input type="checkbox"/> Maungarei / Mount Wellington | <input type="checkbox"/> Ōtāhuhu / Mount Richmond                        | <input type="checkbox"/> Te Kōpuke / Titikōpuke / Mount St John              |
| <input type="checkbox"/> Maungauika / North Head      | <input type="checkbox"/> Ōwairaka / Te Ahi-kā-a-Rakataura / Mount Albert | <input type="checkbox"/> Te Pane o Mataoho / Te Ara Pueru / Māngere Mountain |
| <input type="checkbox"/> Maungawhau / Mount Eden      | <input type="checkbox"/> Pukewiwi / Puketāpapa / Mount Roskill           | <input type="checkbox"/> Te Tātua a Riukiuta / Big King                      |
| <input type="checkbox"/> Ōhinerau / Mount Hobson      |  |  |

### Exact location on the Maunga (if project includes physical interaction with the maunga, such as filming, taking samples, or conducting a survey)

### What are the start and end dates for your project?

Start date \*

End date \*

### Interaction with the Tūpuna Maunga

What are you going to be doing on the Tūpuna Maunga? E.g. taking samples, conducting a survey

What equipment are you likely to use? E.g auger, borehole drill

\*

Word count:

### Mana Whenua partnership, participation and cultural competency

### Please describe how mana whenua are included and/or considered within this project: \*

(Examples of this can be; that the project is led by mana whenua, that there is mana whenua involvement in the project concept and design, or that there is mana whenua participation in some aspect of the project).

### If there is no mana whenua engagement, please describe your understanding of the significance of the Tūpuna Maunga to mana whenua, and how this understanding will influence your project: \*

### Project outcomes

\* indicates a required field

### Tūpuna Maunga outcomes

Tūpuna Maunga are treasured places for Mana Whenua and the people of Tāmaki Makaurau / Auckland. Carrying out activities on the Tūpuna Maunga is a privilege.

#### **How will your project contribute to the health and well-being of the Tūpuna Maunga? \***

\*Please refer to the Tūpuna Maunga Integrated Management Plan <https://www.maunga.nz/plans-policies-and-procedures/> Tūpuna Maunga Values (page 59-85) and Tūpuna Maunga Pathways (pages 86-87)

### Environmental outcomes

#### **Are there any environmental benefits of this project? \***

- Yes
- No

#### **If yes, please describe:**

Word count:

### Community outcomes

#### **Are there any community benefits of this project? \***

- Yes
- No

#### **If yes, please describe:**

Word count:

### Preferred residency dates

\* indicates a required field

#### Select your preferred month for the residency \*

- November 2026
- December 2026
- January 2027
- February 2027
- March 2027
- April 2027
- May 2027

**Please write any preferred dates within your selected month. If you are successful in your application, the Michael King Writer's Centre will contact you to organise the dates of your residency. \***

**Please write any dates that you cannot do.**

### Transport

\* indicates a required field

**Do you have a car that you would like to park at Signalman's House during the residency? \***

- Yes
- No

### Accessibility

\* indicates a required field

**Do you have any accessibility needs? \***

- Yes
- No

**If yes, please describe:**

### Supporting documentation / Ngā puka tautoko

# TMA Residency Programme

## Form Preview

If you have letters of support or consultation we recommend you attach them. You may also like to include supplementary information to support your application.

If you are a successful recipient, you will be contacted for your bank details.

### Supporting documentation 1

Attach a file:

### Supporting documentation 2

Attach a file:

### Supporting documentation 3

Attach a file:

### Supporting documentation 4

Attach a file:

## Declaration and privacy / Ngā whakīnga whai pānga me te noho tapu o ngā kōrero

\* indicates a required field

Note: Tūpuna Maunga Authority reserves the right to decline an application or request a refund of a scholarship if any of the information you supply is found to be incorrect.

**I/we certify that to the best of our/my knowledge the information contained in this application is correct \***

Yes  No

**I/we confirm that any funds granted will only be used for the activity described in this application \***

Yes  No

**I/we confirm that to the best of our/my knowledge I/we have no perceived, potential or actual conflict of interest in applying for or using any funding \***

Yes  No

If in doubt you should declare the conflict.

# TMA Residency Programme

## Form Preview

**If you have a perceived, potential or actual conflict of interest, please describe below**

- I/we understand that the Tūpuna Maunga Authority is bound by the Local Government Official Information and Meetings Act 1987
- I/we understand that my/our name and details about the project may be released to the media or appear in publicity material
- I/we understand that I/we have the right to have access to this information
- I/we confirm that I/we have obtained the consent of all people involved to provide these details.

**I agree to the above disclosure conditions in respect of my scholarship application. \***

- Accept  Decline

**Date:**

When your application is submitted you will receive an automatic confirmation email that the application has been received from Smartygrants. If you do not receive an email confirmation, please check to see if the email has been treated as "spam".

Contact the [TMA permit coordinator](#) if you need advice on your application.

**How did you find out about this grant? \***

- Maunga.nz website  University or other education provider  Local board  Word-of-mouth
- Council website  Iwi/Marae contact  Social media  Other:
- Council mail-out  Council staff member

## Privacy

Any personal information that you provide in this form will be held and protected by Auckland Council in accordance with our [privacy policy](#) and with the Privacy Act 1993. Our privacy policy explains how we may use and share your personal information in relation to any interaction you have with the council, and how you can access and correct that information. We recommend you familiarise yourself with this policy.

If selected for the Tūpuna Maunga Residency, the applicant consents to the sharing of their personal information by the Tūpuna Maunga Authority to the Michael King Writers Centre, for the sole purpose of stipend payment. Access to this information will be available to the Michael King Writers Centre for only as long as necessary for payment to be made to the applicant. Personal information will be retained by the Tūpuna Maunga Authority for as long as required for relevant legislative purposes.

