

## Expression of Interest for Youth Voices in the New Zealand Curriculum Refresh

**Tell us about you and your organisation** (Organisation Support Person to fill out)

Name:	
Contact phone number:	
Contact email:	
Community group/organisation, Māori organisation, school and/or advocacy organisation which you are making this application on behalf of:	
What is the primary purpose of your organisation?	
Tell us about the community you serve	
What work do you/your organisation currently do to support children and young people to learn?	
How will your organisation support a young person to participate in the Voices group?	

**Please fill the following out with the young person that you are nominating**

Name	
Age (at 1 October 2022)	
How do you describe your whakapapa/ethnicity?	
What language(s) do you speak at home?	
Do you have a disability?	
Please share with us anything you feel is important for us to know about you	
Which Voices group would you like to join and why?	

Where do you do most of your learning?	
Why do you want to join the Youth Voices Groups? What aspirations do you have for yourself and within the project?	
Every young person has talents, skills and interests. Please can you share with us some of yours?	
You will be connecting and working with diverse young people and adults from across the country. Please let us know if you need any specific support to do this. How can we help you to participate?	