

**Maori Pacific Support Plan HWNZ Funding Supervisors/Mentors  
Claim Form – (NDHB Employees only)**

Supervisor/Mentors Name: .....

Area of Work .....

Employee Number: .....

Signature:.....

Supervisee's Name: .....

Cost Code- PG ED :501-5215    NETP:501-8267 ( Circle One )

**Total Amount to be Paid: ..... ( please see attach support plan)**

Approved by NETP. PG ED Coordinator .....

Approved by ADON or DONM.....

