

COMMUNITY GRANTS APPLICATION FORM

Application No. _____
(office use only)

The major funding round for the Community Grants Scheme is distributed at the beginning of each financial year. Applications received outside of this period are subject to funding availability.

All sections must be completed and supporting material attached to the back of the form (see Section 7. Checklist).

More information can be found on our website www.kaweraudc.govt.nz or by contacting the Administration Officer, ph: 07 306 9009.

Completed applications should be addressed to:
Administration Officer
Kawerau District Council
Private Bag 1004
Kawerau 3169

Amount applied for: \$ _____
(including GST) (from page 4)

1 CONTACT DETAILS

1.1 Name of your organisation: _____

Phone: _____	Fax: _____
Email: _____	Website: _____
Postal address for correspondence: _____ _____	

1.2 Name of principal contact: _____

Position held in group: _____

Phone (day): _____	Fax: _____
Mobile: _____	Email: _____

1.3 Name of secondary contact: _____

Position held in group: _____

Phone (day): _____	Fax: _____
Mobile: _____	Email: _____

2

ABOUT YOUR ORGANISATION

2.1	Which of the following describes your organisation?	Incorporated society:	Yes/No
		Trust:	Yes/No
	<i>Please provide a copy of your Certificate of Incorporation</i>	Other (please specify):	_____

2.2	How long has your organisation been operating?
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2.3	What are your group's main objectives and activities?

2.4	How many paid staff in your organisation?
	How many volunteers in your organisation?
	How many people does your group work with in a typical week? (<i>i.e. the total number including clients, members, participants</i>)

2.5	Is your group GST registered?	Yes/No
	If Yes, please record your GST No:	

2.6	Please record your Bank Account No*:
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** Please attach a bank generated deposit slip to the back of this application form.*

3.1 Please provide a title for the project, activity or proposal for which you are seeking funding (approx 8 words):

3.2 Give a brief description of the specific activity/s for which you are seeking funding (*If you have a separate project plan or require more space, please list the key points here and attach a full description of your proposal to the back of this form*):

3.3 How long will the project run?

Starts: _____

Finishes: _____

Ongoing: Yes/No

3.4

FINANCIAL DETAILS OF YOUR ACTIVITY

Note: All figures to include GST (If any)

Please provide a breakdown of the budget for the project, service or proposal for which you are seeking assistance:			
PROJECT COSTS		PROJECT INCOME	
Description of cost*	Amount	Income source	Amount
Salaries / wages	\$	Applicant organisation's contribution	\$
Postage / telephone / administration	\$	Fundraising	\$
Advertising / promotion	\$	Donations / sponsorships	\$
Professional fees	\$	Entry fees	\$
Travel costs	\$	Value of donated material	\$
Project materials	\$	Grants (please specify):	\$
Labour cost	\$		\$
Venue / equipment hire	\$		\$
Other costs (please specify):	\$		\$
	\$	Other income (please specify):	\$
	\$		\$
	\$		\$
TOTAL ESTIMATED COST	(a) \$	TOTAL INCOME	(b) \$

* Please endeavour to obtain quotes wherever possible and attach copies to the back of this form

3.5 What activity/s within this project are you seeking funding from Council?

Amount applied for: \$ _____ (include this amount in the space provided on page 1 of this form)

4

CRITERIA TO RECEIVING A GRANT FOR YOUR PROJECT, SERVICE OR PROPOSAL

4.1 Criteria for Grant Funding:

- The grant cannot exceed \$3,000.
- The project/programme for which the application is being made must fulfil a community need and enhance the life of Kawerau residents.
- The applicant must provide a full budgeted breakdown of the project/programme and it has to be financially viable.
- The application must be from a non-profit organisation which provides welfare services to either people or animals.
- An accountability report from organisations receiving grants is required at the end of the project/programme.
- Not eligible for grants are: organisations that have already received Council funding for an event or programme, government agencies nor those projects/programmes deemed to be the responsibility of central government.

Applications will be considered against these criteria then approved or decline.

4.2 How will you know if your project is successful, and what will be the benefits to the Kawerau community?

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4.3 What will happen to the project if:

- this funding application is unsuccessful or,
- only a portion of the funds are received

Yes/No The project will proceed as outlined

Yes/No The project will be delayed
(please specify expected length of delay): _____

Yes/No The project will be downgraded

Yes/No The project will be prevented from being carried out

5

FINANCIAL DETAILS OF YOUR ORGANISATION

Note: All figures to include GST (If any).

		Last financial year	This financial year (to date of application)
5.1	What was your organisation's total income (Money received)? *	\$	\$
	What was your organisation's total expenditure (Money spent)? *	\$	\$

** Please attach a copy of your latest audited accounts or balance sheet or, if you are a new group, a statement of estimated income and expenditure for your first year*

5.2 What funding assistance has your group/organisation received from the Council over the past 3 years:

Year	Amount received	Purpose

We the undersigned do solemnly and sincerely declare and acknowledge that:

- The details we have given in all sections of this application are true and correct to the best of our knowledge.
- We have the authority to commit our group to this application.
- All information contained in this application is subject to the Local Government Official Information and Meetings Act 1987, and therefore this information may be released upon request.
- The Council may collect from third parties any information it deems necessary about the applicant or the application.

If the application is successful, We/I agree to:

- a) Acknowledge the offer of a Grant for our project and expend this funding exclusively for the purpose for which it was applied for.
- b) Return an Accountability Form.
- c) Undertake to repay to the Kawerau District Council any, or all of the, Grant provided should, for any reason, the project not be undertaken as proposed or the funds approved not be required for the completion of the project. Repayment will accompany the Accountability Form.
- d) Participate in any funding audit of the project which may be conducted by the Kawerau District Council.

Name:	
Position held in group:	
Signature:	
Date:	
Name:	
Position held in group:	
Signature:	
Date:	

Please complete the following checklist to ensure you have completed the application process and attached all necessary information:

- Yes/No All sections of this form have been completed.
- Yes/No You have attached a bank generated deposit slip verifying your bank account details (2.6).
- Yes/No You have attached a separate copy of your project plan where one has been developed (3.2).
- Yes/No You have attached quotes for expenses for your project or proposal where these have been obtained (3.4)
- Yes/No You have attached a copy of your latest audited accounts or balance sheet or, if you are a new group, a statement of estimated income and expenditure for your first year (5.1)
- Yes/No The declaration form has been signed by two members of your organisation who have the authority to do so (6)
- Yes/No You have made a copy of this application for your future reference.

Please return your application to
The Administration Officer
Kawerau District Council
Private Bag 1004
KAWERAU 3169

Ph: (07) 306 9009

Fax: (07) 323 8072