

Application for Grant

(District Community Support Scheme Te Aroha, Morrinsville and Matamata Community Boards)

1. Applicant's Details

Name of applicant: _____

Postal address for correspondence to be sent: _____

Physical address of the organisation: _____

What is the purpose or main activity of the organisation? _____

Please provide the name and telephone numbers for two people in your organisation who can help us if the assessment committee require more information. Under the Privacy Act (1993) you must get consent from these people to provide their details here.

Name: _____

Phone (day): _____ Phone (night): _____

Name: _____

Phone (day): _____ Phone (night): _____

What type of funding are you applying for?

Grant Guarantee against Loss Loan

If your organisation is a membership organisation, how many members/people does the organisation serve? _____

2. Project Details

Please provide a detailed description of the project or activity for which you are seeking assistance:

4. Declaration

I hereby declare that the information supplied here on behalf of our organisation is correct. If the application is successful, my organisation agrees to participate in any funding audit of my organisation conducted by the local authority.

I consent to the Matamata-Piako District Council collecting the personal contact details provided above. I undertake that I have obtained the consent of the other contact person(s) to provide these details. We acknowledge our right to have access to this information. The consent is given in accordance with the Privacy Act 1993.

Please advise us if there is any information provided to support your application that should be kept confidential and the reason why.

1. Name: _____ Signature: _____

Position in Organisation: _____ Date: _____

2. Name: _____ Signature: _____

Position in Organisation: _____ Date: _____

Bank Account Number - - -

Bank Branch Account Number Suffix

Use the checklist below to ensure you have included all the required information:

- Financial Accounts (if applicable)
- Detailed budget of your project
- Any written quotes (if applicable)
- Demonstrated a need in the community
- Identified the groups of people who will benefit from the project
- Checked that your figures add up correctly
- Signed and dated your application

Please return your completed application and relevant attachments to:
 Matamata-Piako District Council
 PO Box 266
 Te Aroha 3342

Please note there are Application Guidelines [CS-Grants8](#).

Please provide details of any benefits that the project will provide to the wider community (other than benefits for your members):

When is your project expected to begin? _____

Please indicate the number of people in each age group who are expected to directly benefit from your project:

_____ Under 5 years _____ 5 – 19 years _____ 20 – 25 years _____ Over 25 years

Does your project involve a particular cultural or ethnic group? Yes No

If so, please indicate Maori Pacific Island Other: _____

Will the project improve facilities on a school site? Yes No

If yes, will the facility be available for the use of the wider community?

Yes No

3. Financial Details

Are you registered for GST? Yes No

Expenditure

Please provide a detailed budget for the activity or project you are requesting funding for. All costs must be itemised below - this may include a percentage of overhead costs, including salaries, except volunteer labour, that apply to the project (*attach another page if necessary*). Please also attach any written quotes where relevant.

Item	Cost
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total Cost of Project (A)	\$ _____

Income

Please indicate how you intend to fund the project:

Donated materials	\$ _____
Cash in hand for the project	\$ _____
Charge of entry fee	\$ _____
Fundraising (estimate)	\$ _____
Sponsorship (estimate)	\$ _____
Grants (please provide details below)	\$ _____
Other	\$ _____
Total Funds Available/Expected (B)	\$ _____

To find out how much money you should apply for, subtract your contribution (B) from the total cost of the project (A). The answer (C) is the amount of money you need in order for your project to go ahead. Organisations not registered for GST should include GST with their estimates.

A. Total Cost of Project	_____
B. Less Total Funds Available	_____
C. Balance Required	_____
D. Amount Requested	_____

If the Amount Requested (D) is different to the Balance Required (C), please explain: _____

Briefly describe any voluntary effort or donated materials provided for the project: _____

Total Cash in Bank: _____ *Please attach financial accounts*

This should equal the amount of funds shown in your financial records as Cash in Bank. Please specify any other organisations from which you've requested grants for this project and the details of your request:

Organisation(s)	Amount Requested	Amount Received