

# Creative Communities New Zealand Scheme

## PROJECT APPLICATION FORM

### Important Information

Post to: Waimate District Council  
P O Box 122  
Waimate 7960

Courier: Queen Street  
Waimate

By Hand: Local Government Centre  
Queen Street  
Waimate

For Attention: John Larcombe

*Late applications will not be considered*

Please complete one application form per project. If you require assistance please contact the *Creative Communities New Zealand* scheme administrator at your district or city council office. Applications are photocopied. For clarity please type or print in black ink.

### **First** check your eligibility

The eligibility criteria and priorities are set out in the accompanying guidelines. Please read them carefully before filling out this form.

- |  | Yes                      |
|--|--------------------------|
| • Will the project increase community participation in the arts? | <input type="checkbox"/> |
| • Will the project increase community interest in the arts?      | <input type="checkbox"/> |
| • Will the project enhance or strengthen local arts structures?  | <input type="checkbox"/> |

If you have ticked any of the above, continue.

Yes

Is funding sought for facility development?

Purchasing art works for a gallery

A project in an education institution?

An ongoing expense in your Organisation

A project which will have started by the time grants are announced?

Catering costs?

Debt servicing?

Fundraising?

A project already funded by Creative New Zealand?

If you tick any of the above your project **may** not be eligible. Contact the scheme administrator at your district or city council before continuing.

## 1. Tell Us About Yourself

(If you are an individual some of these questions may not apply)

1.1 \* Full name of individual or organisation:

\_\_\_\_\_

Commonly used name (if different from above):

\_\_\_\_\_

1.2 Street Address:

\_\_\_\_\_

\_\_\_\_\_

1.3 Postal Address:

\_\_\_\_\_

\_\_\_\_\_

1.4 Telephone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

1.5 Contacts (Please name two people we can contact if we need further information)

Name: \_\_\_\_\_

Telephone No. Day: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone No. Day: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

1.6 What are your organisation's objectives?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1.7 Is your organisation a legally constituted trust or Incorporated society? Yes  No

1.8 Are you registered for GST? Yes  No

1.9 If yes, your GST number is: 

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1.10 What is your primary cultural or ethnic affiliation?  
(Both groups and individuals need to answer this question)

- Maori  Pacific Island  
 NZ European / Pakeha  Other (please specify)

\_\_\_\_\_

1.11 Please name up to two referees for you and your project.

Name: \_\_\_\_\_

Telephone No. Day: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone No. Day: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

## 2. The Project

2.1 Please tell us about your project in full (attach additional sheets if you wish)

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2.2 When will your project take place?

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2.3 In which local authority area(s) will your project take place?

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2.4 Where do the participants, or those that you expect to benefit from in your project, come from? Please estimate.

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2.5 Is the project aiming to involve a particular cultural or ethnic group? If so is it:

Maori  Pacific Island

Other (please specify) \_\_\_\_\_

2.6\* Does your project target a particular age group? Please tick appropriate box.

Under 25  Over 25  General

2.7 \* Which of the following criteria of the *Creative Communities New Zealand* scheme **best** describes your project (tick one box only)

\* Refer to guidelines for further information

Projects that increase participation in the arts   
(Will usually involve opportunities for active participation for the community project is aimed at.)

Projects that increase community wide interest in the arts   
(Will often involve presentation of new works and experiences to the community the project is aimed at.)

Projects that enhance and strengthens the local arts sector   
(May involve training, engagement of consultants, purchase of equipment, networking and seminars.)

2.8 \* What art form grouping **best** suits your project (tick one box only)

- language arts and literature (eg poetry, story telling, fiction, whai korero)
- performing arts (eg dance, music, theatre)
- visual arts (eg painting, craft, toi whakairo)
- multi-disciplinary (projects which cross over two or more of the above categories)

2.9 \* What steps have you taken to ensure access for people with limited opportunities to participate in arts activities?

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2.10 What will be the benefits of your project taking place?  
(It is useful to refer back to the criteria of the scheme and tell us how your project relates to those aims.)

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2.11 How will you advertise or promote the project?

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### 3. Money and Resources

3.1 Outline the costs of your project. You may include a percentage of overhead costs, including salaries (except volunteer labour) which apply to the project. Where appropriate, please include written quotes. Organisations not registered for GST should include GST with their estimates.

Item	Dollar Amounts
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>A</b>	<b>Total Cost</b> \$ _____

3.2 Please outline how you intend to fund the project excluding *Creative Communities New Zealand* scheme application.

a. Donated material	\$ _____
b. Cash in hand towards project	\$ _____
c. Loans / mortgage / debenture	\$ _____
d. Charge to participants or membership subscription	\$ _____
e. Other sponsorship / grant (please specify source)	\$ _____
f. Intended fundraising (provide an estimate)	\$ _____
g. Expenditure on project to date	\$ _____
h. Other	\$ _____
<b>B</b>	<b>Total funds available/expected</b> \$ _____

Cash in hand towards the project	\$ _____
Loans / mortgage / debenture	\$ _____
Charge to participants or membership subscription	\$ _____
Other sponsorship / grant (please specify source)	\$ _____
Intended fundraising (provide an estimate)	\$ _____
Expenditure on project to date	\$ _____
Other	\$ _____
<b>B</b>	<b>Total funds available</b> \$ _____

3.3 Please work out below the amount of funding requested.

The total cost of the project (A), minus total funds available for the project (B) will usually equal the amount requested from the Creative Communities Scheme.

- a. Total cost of project \$ \_\_\_\_\_
- b. Less total funds available \$ \_\_\_\_\_
- c. Difference \$ \_\_\_\_\_
- d. Amount requested \$ \_\_\_\_\_

3.4 \* Are you seeking:

- A grant
- A guarantee against loss
- A loan

3.5 What other grants, loans, guarantees against loss have you applied for with this project?

- Date
- Source type
- Amount
- Funding received

#### 4. Financial Background

4.1 If you are an existing group or organisation, provide details from your last set of annual accounts.

4.2 Provide details of any grants, loans or guarantees against loss you have previously received through the *Creative New Zealand* scheme.

Date	Project	Type	Amount

#### 5. Final Check

I declare that the information supplied here is correct. If the application is successful, I/We agree to:

- i. return the project report form (which will be sent to me in due course by the local authority).
- ii. participate in any funding audit of my organisation or project conducted by the local authority.

I consent to the Waimate District Council collecting the personal contact details provided above, retaining and using these details and disclosing them to Creative New Zealand for the purpose of review of the *Creative Communities New Zealand* scheme. I undertake that I have obtained the consent of the other contact person to provide these details. We acknowledge our right to have access to this information. This consent is given in accordance with the Privacy Act 1993.

Name \_\_\_\_\_

Position in organisation \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_