



\$50,000 & UNDER GRANT APPLICATION

The Community Trust of Southland

Telephone: (03) 218 2034 or 0800 500 185

Fax: (03) 218 2035 or 0800 500 186

62 Don Street

P.O. Box 1646

Invercargill

Email: info@ctos.org.nz

Web: www.ctos.org.nz

Enquiries always welcome

Section 1: ORGANISATION DETAILS (All applicants to complete)

1. Registered or Full Name of Organisation

2. Organisation Postal Address (include postcode)

3. Organisation Street Address

Website

4. Contact Persons

1. Name

Position

Telephone (landline and mobile)

Email Address

2. Name

Position

Telephone (landline and mobile)

Email Address

5. Organisation Legal Status

Incorporated Society

Local Body

Charitable Trust

Other (please specify)

Charities Commission Number (if applicable)

6. Briefly state what your organisation does:

7. What part of the Community Trust of Southland's area does your organisation cover?

8. How many members/participants does your organisation have?

Total number

If possible, are you able to provide a further breakdown of the total number as follows:

Children (0-12)

Youth (13-24)

Adults (25-64)

Seniors (65+)

9. How many people are involved in running your organisation?

Paid full time staff

Paid Part time staff

Volunteers

10. Do you charge an annual subscription?

Yes

No

If yes please detail below how much you charge for e.g. juniors and adults:

11. Is your organisation affiliated to a national organisation?

Yes

No

If yes, please give details below:

12. Who are the current trustees and/or officers of your organisation?

Chair

Secretary

Treasurer

Other trustees
and/or committee
members

13. What date was your organisation's most recent AGM held?

Please attach the minutes of that AGM

SECTION 2: GRANT DETAILS (All applicants to complete)

14. Please detail how your application aligns with the Community Trust of Southland's sector priorities:

CTOS sector priorities are detailed in the Funding Guide or are available on our website www.ctos.org.nz

15

Project Grant?

This includes one off projects e.g. facilities, events, pilot programmes, new initiatives and equipment.

Amount of Grant

\$

Total Project Cost

\$

PLEASE GO TO SECTION 3

16.

Operational Grant?

Operational Grants are generally only available for health and social service organisations to assist with their operating costs.

Amount of Grant

\$

Total Budgeted
Expenses

\$

PLEASE GO TO SECTION 5

SECTION 3: PROJECT DETAILS (only complete if you are applying for a project grant)

17. What does your organisation want the grant for?

18. Why is the project/programme needed?

19. Approximately how many people will directly benefit from this project/programme? Total number

If possible, are you able to provide a further breakdown of the total number as follows:

Children (0-12)

Youth (13-24)

Adults (25-64)

Seniors (65+)

20. Which parts of the Community Trust of Southland's area will benefit from your project/programme?

21. What are the proposed project/programme time frames? Start date

Finish date

22. Does the project relate to a facility?

Yes

No

If yes, please detail if you have obtained relevant consents (e.g. building/resource) and their current status:

IF YOUR APPLICATION RELATES TO A ONE OFF PROJECT, PLEASE GO STRAIGHT TO SECTION 4.

IF YOUR APPLICATION RELATES TO A PROGRAMME, PLEASE COMPLETE QUESTIONS 23-28 BEFORE GOING TO SECTION 4

23. Is your organisation's programme existing or new?

Existing

New

If an existing programme, how has it been funded in the past:

24. Are there any other organisations/groups that provide a similar programme in Southland?

Yes

No

If yes, please detail how your group is different:

25. How will people be referred to the programme and/or how will you promote the programme to potential participants?

26. Has your organisation previously applied to local or central government for this programme?

Yes

No

If yes, who did you apply to and what was the outcome?

27. Who will carry out the programme delivery and what are their relevant qualifications and/or experience?

28. How does your organisation plan to measure the impact of the programme?

PLEASE GO TO SECTION 4

SECTION 4: PROJECT FINANCIAL DETAILS

29. Is your organisation registered for GST?

Yes (please ensure the project budget below is GST exclusive)

No (please ensure the project budget below is GST inclusive)

30. Project Budget

COSTS		SOURCES OF FUNDING/FUNDRAISING		
Expense	Amount	Raised to date from:	Amount	Date Funding Confirmed/Received
		Other funders: <i>please list</i>		
		Your organisation:		
		Still to be raised from:	Amount	Date Funding Outcome Due
		Community Trust of Southland		
		Other funders: <i>please list</i>		
		Your organisation:		
Total Costs	\$	Total Funding	\$	

It is important to ensure that total costs equal total funding

31. Has your organisation sought alternative quotes?

Yes (please attach copies)

No

If no, please explain why not:

32. How do you plan to pay for any future operational costs arising from this project/programme?

33. What contingency plans does your organisation have in place if this application is unsuccessful?

34. What financial or in kind contribution is your organisation making to this project/programme, and do you think this contribution is reasonable?

PLEASE GO TO SECTION 6

SECTION 5: OPERATIONAL GRANT DETAILS

Please attach your organisation's annual operating budget for the forthcoming year

35. Is your organisation new or existing?

New

Existing

If an existing organisation, how have you been funded in the past?

36. Why are you seeking an Operational Grant?

37. How do you expect your organisation will be funded in the long term?

38. What contingency plans does your organisation have in place if this application is unsuccessful?

39. Are there any other organisations that provide a similar service in the Community Trust of Southlands' area?

Yes

No

If yes, please detail how your organisation and/or services are different:

40. Approximately how many people directly benefit from your organisations services? Total number

If possible, please provide a further breakdown of the total number as follows:

Children (0-12)

Youth (13-24)

Adults (25-64)

Seniors (65+)

41. How are clients referred to your organisation?

42. Does your organisation receive grants or contract funding from local or central government and/or any other funding agency?

Yes please go to Question 43

No please go to Question 44

43. Details of funding received from local or central government and/or any other funding agency?

What is the funding for?	Total Grant/ Contract Funding Received per annum	Funded By e.g. SDHB, CYF, FACS, MOH, ILT, Lottery, MOE, SPARC	Length of Grant/Contract i.e. start date and end date)

44. Has your organisation previously applied to local or central government for funding?

Yes

No

If yes, who did you apply to, and what was the outcome?

45. How do you know as an organisation you are meeting the needs of your clients and/or the community?

PLEASE GO TO SECTION 6

SECTION 6: ORGANISATIONAL FINANCIAL DETAILS (All applicants to complete)

Please enclose your organisation's latest audited annual financial statements & most recent bank statements

46. Please provide details from your organisation's latest audited financial statements: Year ended:/...../.....

Total Annual Income \$ Total Annual Expenses \$ Surplus/Deficit \$

47. What level of reserves if any does your organisation currently have? \$

48. Please detail why any of these reserves **CANNOT** be used for the purpose of this application.

PLEASE GO TO SECTION 7

SECTION 7: REQUIRED DOCUMENTATION (All applicants to complete)

The following documents are required to accompany your organisation's grant application:

- A copy of your organisation's Constitution, Trust Deed, Rules etc.
- A copy of the minutes from your organisation's most recent Annual General Meeting.
- A copy of your organisation's most recent annual audited financial statements.
- Your organisation's full operating budget if applying for an Operational Grant.
- Income and expenditure accounts for the months of operation, if your organisation has been operating for less than 12 months.
- A copy of your organisation's most recent bank statement for **all** accounts, including investments.
- A bank coded deposit slip for direct crediting purposes, if your application is successful.
- A letter from Inland Revenue or Charities Commission Certificate of Registration confirming your organisation's tax exempt status. Contact Inland Revenue/Charities Commission if you need help in this area. **AN IR15C CERTIFICATE IS NOT ACCEPTABLE AS EVIDENCE OF TAX EXEMPT STATUS.**
- Letters of support if relevant.
- Two Quotes (if applicable).
- For facility related projects please provide detailed costings and project plans.

PLEASE GO TO SECTION 8

SECTION 8: DECLARATION AND PRIVACY ACT 1993 AUTHORISATION (All applicants to complete)

This declaration and authorisation relates to information in this application that the Community Trust of Southland may hold about your organisation now or in the future.

- We hereby declare that we are authorised to submit this application and that any grant received will be used for the purpose for which it was approved.
- We authorise the Community Trust of Southland to use this information for the purposes of administration and consideration of this application.
- We authorise the Community Trust of Southland to make any enquiries of any third parties, (which may involve discussing information contained in this application) or undertake audits of our organisation in connection with this application.
- We hereby declare that the project has not been started or committed to.
- We hereby declare that the information provided in this application is true and factual.
- We authorise the Community Trust of Southland to advertise or publish the name of our organisation and the amount of the grant approved if this application is successful, including disclosure of this information to other funding agencies.
- We acknowledge that any decision made by the Community Trust of Southland is final.

Name of contact person:

1. Signature Date

Name of contact person:

2. Signature Date

NOTE: This form MUST be signed by the two contact persons from your organisation listed at the front of the form.

SECTION 9: GENERAL INFORMATION (All applicants to complete)

How did you find out about the Community Trust of Southland?

Previous application The Southland Times Radio Cue TV Friends/Family

Community newspaper *(please specify)*

Internet *(please specify website)*

Funding Forum/Seminar *(please specify which forum and where)*

Other *(please specify)*

Don't know