Introduction and Instructions for Applicants

* indicates a required field

Introduction

Creative New Zealand is New Zealand's national agency for developing the arts. The Creative Communities Scheme is one of the ways Creative New Zealand fund a broad range of arts projects in local communities.

Before applying for the grant, please read the Creative Communities Scheme Guide Application Guide

If you have already received funding from the Creative Communities Scheme for a project, you must complete a report on that project before making another application, unless the project is still in progress.

For more information please contact; Vic Bates Carterton Events Centre 50 Holloway Street, Carterton victoria@cdc.govt.nz

Privacy

The personal information Carterton District Council collects may include your name, addresses, email address, telephone numbers, information on your use of our services or facilities and any other information provided by you in connection with, or specifically related to your communications with us or, your use of our services or facilities.

Collecting your information

- We may collect personal information about you when you or someone acting on your behalf provides information to us directly.
- We may collect personal information about you from other organisations, entities or persons.
- When you visit one of our websites, we may use technology solutions such as "cookies" to provide you with better access to tailored information and services on the websites and to better serve you when you return to them.
- Our internet service providers may also make a record of your visit and log information for statistical purposes. This information is only analysed on a bulk basis for broad demographic content. Individual use is not analysed. We do not attempt to identify users or their browsing activities unless they choose to give us personal information while using our website.

For more information on the council's privacy policy, see the website.

Privacy *

 \Box I declare that I have read the privacy information and I am comfortable to proceed with the application

Applicant Details

* indicates a required field

Applicant Details

Applicant *

Individuals or groups/organisations can apply for Creative Communities Scheme funding. Individuals must be New Zealand citizens or permanent residents.

IndividOrganisat	ual tion Name	○ Organisation	
Title	First Name	Last Name	
Applicar Address	nt primary a	ddress	
	Victorias		
Miller Street	Victoria Stre	Authoria Street	Frankin Street Victoria
Dounds	PLAC	CEHOLD Linte Longdale Street Longdale Street Lintle Bourke Street	ER LONG LE STREET
170		■ Bounte Street	ins street

Applicant postal address Address

Key Contact Person

Must be a URL.

This is the person who we will correspond with about the grant and proposed project. We will also send all correspondence to the email provided.

-	contact *				
Title	First Name	Last Name			
This is the			la la coma de la		
inis is the	person we will cor	respond with about t	inis grant.		
Position	*				
For examp	le: Manager, Coord	dinator, Board Memb	er.		
Phone n	umber *				
Email ad	dress *				
1- 4b- 1		- - - - - - - - - - - - - -		wandiastian at the CCC	
	ent committee		support or you	r application at the CCS	
○ Yes		-	○ No		
Do you o	or your organis	ation have a NZE	SN or CRN? *		
O NZBN		○ CRN		Neither	
Applican	t NZBN *				
				rmation. Click Lookup above	e to
		ed the NZBN corre	ectly.		
	and Companies Re	gister Information			
NZBN					
Entity Nar					
Registrati					
Entity Sta					
Entity Typ					
_	d Address				
Office Add	dress				
Applican	t CRN *				
1- 1					
				ok up the following informat	ion.
Click Look correctly.		ck that you have e	entered the Char	ity Registration Number	

New Zealand Charities Register Information

Charity Registration		
Number		
Organisation Name		
Other Names		
Status		
Street Address		
Postal Address		
Telephone		
Fax		
Email		
Website		
Date Registered		
Must be formatted correctly.		
Bank Account Details		
If successful, this is the bank account into wh	nich funding will be dep	osited.
Bank Account * Account Name		
Account Number Must be a valid New Zealand bank account formation	t.	
Ethnicity of Applicant		
Ethnicity is self preserved and you may want is also an opportunity to provide further infor like to share any details.		
Please select the ethnicity you or the apself preserved and you may want to ind NZ Pākehā NZ Māori Pacific Peoples Asian		
Please feel free to provide further inforethnicity.	mation about you or	your group's

Project Summary

* indicates a required field

Basic Project Details and Funding Criteria

Please provide basic details about your proposed cultural artform project and the funding criteria that it is most closely aligned with it.

criteria triat it is most closely aligned with it.	
Please provide a project title *	
Please provide a short summary of your	project. *
Word count: Must be no more than 100 words.	
Please select the funding criterion most	
Funding criteria definitions:	
 Access and Participation: Create opp with, and participate in local arts activitie Diversity: Support the diverse artistic comparticipate in the arts 	ultural traditions of local communities
Artform, Cultural Practice and Activ	vity Type
Please select the type of artform and activity project.	that is most closely connected to your
Which artform and/or cultural practice is to? *	your proposed project most connected
 Craft/object art Dance Inter-arts (hybrid artform) Literature Music 	 Ngā toi Māori Pacific arts Multi-artform (including film) Theatre Visual arts cation Guidelines to ensure your project aligns the

Which activity most closely describes your project type? *

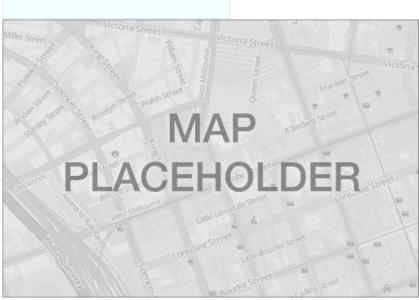
- O Creation only for projects which focus on making an artwork but not performing or exhibiting in public, eg a community weaving group, focusing on weaving, dyeing, textile weaving and up-cycling, requesting funding for materials and venue costs.
- O Creation and presentation for projects which include both creating and performing or exhibiting to the public, eg local youth crafting and painting life-size figures of the World Cup teams to exhibit at the gateway of their town.
- O Performance (presentation only) for the presentation of performing arts only (e.g. theatre, kapa haka, dance, music).
- O Exhibitions for the exhibition or presentation of visual arts or non-performing arts only (e.g. a display of tivaevae by local artists).
- O Workshop any form of training (e.g. a wānanga in raranga or a programme of contemporary dance workshops).

Only one activity can be selected, and should be the type most closely aligned with project purpose and delivery.

Project Location

Project locationT *

Address



Address Line 1, Suburb/Town, State/Province, and Country are required. Please enter the address where your project will be located:

Project Timing

Your project must not have started or finished before funding is approved.

Anticipated start date *	Anticipated end date *
	The project must be completed within 12 mon
	of funding being approved.

Participants and Audience

- **Active participants** are the people involved in making and presenting an artwork or performance, or running and attending a workshop.
- **Viewers or audience members** are the people who come to see the finished work or a presentation.
- If your project is presented in a public space, only include the people who specifically come to see the art work or performance in the number of viewers/ audience members. Please do not include casual passers-by.

Please note, if your application is successful you will need to provide the **actual** number of active participants and viewers/ audience members in your project completion report.

Number of active project participants *		Number of anticipated viewers or audience members *	
Must be a whole number	(no decimal place).	Must be a whole number	(no decimal place).

Project Details

* indicates a required field

This section enables you to share more information about your project and the reasons why it's needed, anticipated results, how it will be delivered, the people who will assist and the connection it has to the chosen criterion.

Please refer to the <u>Application Guide</u> for more information related to the questions and examples which may assist you when responding.

The idea / Te kaupapa

Please describe the overall project idea, what the will lead to, associated artistic goals and funding necessity.

Please outline the need for this project. *	
M. I. I	
Word count:	
Must be no more than 150 words.	
Please describe what you hope to achieve in delivering the	oroject. *
Word count:	
Must be no more than 150 words.	
Must be no more than 150 words.	

The process/ Te whakatutuki

Please describe the process that will be involved in the project. Explain the key stages of your project and how it will be carried out. *
Word count: Must be no more than 500 words.
The people/ Ngā tāngata
Please provide details about the key people or partners who will be involved in your project. Please consider the ways they will contribute, their skills and ability to take part in the designated project timeframe.
Outline the key people who will be involved in your project, including any relevant qualifications and experiences. *
Word count: Must be no more than 500 words. Describe the roles of key personnel involved in delivery of the project. If you are delivering the project with another organisation clearly state who is responsible for what.
Attach any relevant CVs or brief biographies. Attach a file:
Will your project involve participation from another group or organisation? * \bigcirc Yes \bigcirc No
As you indicated that another organisation or group will be involved in the project, please outline the ways in which they will support and collaborate.
Project partner name Must be no more than 25 words. Key roles and responsibilities Must be no more than 25 words.
The criteria/ Ngā paearu
Tell us how this project will deliver to your selected criterion: access and participation, diversity or young people. *
Community Support

	hic communities a	ity support? In particul ffected by this project/	
○ Yes	i i propositi	○ No	
What evidence	do you have that t	:his project/program ha	s community support? *
Supporting M	aterial		
Letter/s of supp Attach a file:	oort		
		ple within your community w lved in the project, and/or co	ho can speak about the benefits onfirm that an invitation has
Example/s of pr Attach a file:	evious work undei	rtaken	
Feel free to upload	images, text or links to	website/s highlighting previ	ous work undertaken.
The Budget/	Ngā pūtea		
* indicates a requ	ired field		
			iture related to your project. In to assist you in completing
Are you registed ○ Yes	red for GST? *	○ No	
Expenditure			
materials, venue	hire, promotion, equ	t and include the details of ipment hire, artist fees and re button at the bottom le	d personal costs. To add
Please note:			
		USIVE if you are registere ISIVE if you are NOT regist	
Item	Detail	Amount (\$)	Quote

	¢	
	Must be a dollar amount.	

Income

Please provide all the income for your project, from other grants, ticket sales, artwork, donations and other funds. To add more rows please click on the Add More button at the bottom left on this table.

Please **do not** include the amount you are requesting from CCS for this grant.

Item	Detail	Amount (\$)
		Must be a dollar amount.
		\$

Budget Totals

Total Income Amount	Total Project Cost	Cost - Income
\$ This number/amount is calculated.	\$ This number/amount is calculated.	This number/amount is calculated. Please Note: This is the mamount you can request f

Grant Funding

There is no limit to how much you can apply for, but most CCS grants tend to be under \$2,000. You may want to look at previously funded projects on the council website for an indication.

You may also be receiving project cost funds from another source (e.g. yourself, your organisation, others). If that's the case include the amount in the 'total project cost'.

Total Amount Requested	\$	
*	What is the total financia funding in this application	l support you are requesting under CCS n?

Financial Statement

Groups or organisations must provide a copy of their latest financial statement. This can be a copy of the audited accounts, an income and expenditure statement or a copy of the unaudited management accounts.

If your group or organisation has reserves which are not being used for this project you should include your reserves statement or policy.

La	test Financial	Statement	Upload *
Att	ach a file:		

Other Grants

Have you applied for funding from	other sources for this project? *
○ Yes	○ No

Please tell us about any other funding you have applied for or received for this project (remember you can't receive funds for your project from both CCS and Creative New Zealand's other funding programmes). To add more rows please click on the Add More button at the bottom left on this table.

Date applied	Who to	How much	Confirmed/ Unconfirmed
Must be a date.		Must be a dollar amount.	
		\$	

Have you	received a gra	nt from the	Creative	Communities	Scheme i	n the pa	ast 3
years? *							

○ Yes ○ No

Please tell us about other grants you have received through the Creative Communities Scheme in the past three years. To add more rows please click on the Add More button at the bottom left on this table.

Date	Project Title		Project completion report submitted
Must be a date.		Must be a dollar amount.	
		\$	

Declaration and Feedback

* indicates a required field

Declaration / Whakaputanga

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

You must declare that you agree with the following statements:

- I/We understand that if this application is successful I/we cannot receive funds for the same project from Creative New Zealand's other funding programmes.
- I/We declare that the details contained in this application are correct and that I/we have authority to commit to the following conditions

If successful you must agree to:

- complete the project as outlined in this application (or request permission in writing from the CCS Administrator for any significant change to the project)
- complete the project within a year of the funding being approved
- complete and return a project report form (this will be sent with the grant approval letter) within two months after the project is completed
- return any unspent funds
- keep receipts and a record of all expenditure for seven years
- participate in any funding audit of my organisation or project conducted by the local council
- contact the CCS administrator to let them know of any public event or presentation that is funded by the scheme
- acknowledge CCS funding at event openings, presentations or performances
- use the CCS logo in all publicity (eg poster, flyers, e-newsletters) for the project and follow the guidelines for use of the logo. Logo and guidelines can be downloaded from the Creative New Zealand website: http://www.creativenz.govt.nz/about-creative-new-zealand/logos
- I understand that the Carterton District Council is bound by the Local Government Official Information and Meetings Act 1987
- I/we consent to Carterton District Council recording the personal contact details provided in this application, retaining and using these details, and disclosing them to Creative New Zealand for the purpose of evaluating the Creative Communities Scheme.
- I/we understand that my/our name and brief details about the project may be released to the media or appear in publicity material.
- I/we undertake that I/we have obtained the consent of all people involved to provide these details. I/we understand that I/we have the right to have access to this information

Please read and agree to the above statements. * □ lagree	
Authorisation	

Please note: All applications by person/s under the age of 18 must be authorised by applicant's parent or legal guardian.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

l agree *	□ Yes			
Name of authorised person *	Title	First Name	Last Name	
person	Must be a senior staff member, board member or a authorised volunteer		appropriately	
Position *				
	Position h	eld in applicant orga	nisation (e.g. CEO, ⁻	Treasurer)

Contact phone number *		
	We may contact you to verify by the applicant organisation	that this application is authorised
Contact Email *		
	Must be an email address.	
Date *		
	Must be a date	
Applicant Feedback		
You are nearing the end of the a click the SUBMIT button please		
Council mail-out	Creative Communities Sch Local paper Poster/flyer/brochure Social media	neme? * O Radio O Word of Mouth Other:
○ Creative NZ website		
Please indicate how you four ○ Very easy ○ Easy		process. * ifficult O Very difficult
How many minutes in total d	did it take you to complete	e this application? *
Estimate in minutes i.e. 1 hour = 60	0	
Please provide us with your additions to the application		