

Waikato District



Before you prepare your application please read the *Creative Communities Scheme Application Guide* linked to the Council webpage. This guide tells you:

- whether you are able to apply for Creative Communities Scheme funding for your project
- which projects and costs are eligible and ineligible
- what information you will need to include in your application

Key points to complete the *Creative Communities Scheme Application Form*

- Applications can only be submitted using this document (*Creative Communities Scheme Application Form* or an online version of this document)
- To complete this application form in Microsoft Word (version 2003 or newer) you need to type your answers to each question in the boxes provided.

Example:

IMPORTANT INFORMATION

- Please complete all sections on the form.
- Only supply additional information to the back of the form.
- Please do not write see attached into any sections on the form.
- Do not supply any personal information not related to your organisation i.e. personal phone numbers, addresses, phone numbers.
- Do not include banks statements or financials that include personal information. You need to keep a copy of your completed application for your own reference.
- For advice on your application, please read Guidelines first before emailing creative.communities@waidc.govt.nz

Before submitting your application, complete this checklist: (mark with an X)

<input type="checkbox"/>	My project has an arts focus
<input type="checkbox"/>	My project takes place in the local authority district that I am applying to
<input type="checkbox"/>	I have answered all of the questions in this form
<input type="checkbox"/>	I have provided quotes and other financial details
<input type="checkbox"/>	I have provided other supporting documentation
<input type="checkbox"/>	I have read and signed the declaration
<input type="checkbox"/>	I have made a copy of this application for my records

PART 1: APPLICANT DETAILS

Name and contact details

Are you applying as an individual or group?

Individual

Group

Full name of applicant:

Contact person (for group):

Street address/PO Box:

Suburb:

Town/City:

Postcode:

Country:

Email:

Telephone (day):

All correspondence will be sent to the above email or postal address

Name on bank account:

GST number:

Bank account number:

If you are successful, your grant will be deposited into this account

Ethnicity of applicant/group (mark with an X, you can select multiple options)

New Zealand European/Pākehā:

Detail:

Māori:

Detail:

Pacific Peoples:

Detail:

Asian:

Detail:

Middle Eastern/Latin American/African:

Detail:

Other:

Detail:

Would you like to speak in support of your application at the CCS assessment committee meeting?

Yes:

No:

If you mark yes, talk to your local CCS administrator before you go so you know who you will be speaking to and for how long.

How did you hear about the Creative Communities Scheme? (select **ONE** and mark with an X)

Council website

Creative NZ website

Social media

Council mail-out

Local paper

Radio

Council staff member

Poster/flyer/brochure

Word of mouth

Other (please provide

PART 2: PROJECT DETAILS

Project name:

Brief description of project:

Project location, timing and numbers

Venue and suburb or town:

Start date:

Finish date:

Number of *active* participants:

Number of viewers/audience members:

Funding criteria: (select **ONE** and mark with an X)

Which of the schemes three funding criteria are you applying under? If your project meets more than one criterion, choose the one that is the project's main focus.

- Access and participation:** *Create opportunities for local communities to engage with, and participate in local arts activities*
- Diversity:** *Support the diverse artistic cultural traditions of local communities*
- Young people:** *Enable young people (under 18 years of age) to engage with, and participate in the arts*

Artform or cultural arts practice: (select **ONE** and mark with an X.)

- | | | |
|---|---|--|
| <input type="checkbox"/> Craft/object art | <input type="checkbox"/> Dance | <input type="checkbox"/> Inter-arts |
| <input type="checkbox"/> Literature | <input type="checkbox"/> Music | <input type="checkbox"/> Ngā toi Māori |
| <input type="checkbox"/> Pacific arts | <input type="checkbox"/> Multi-artform (including film) | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Visual arts | | |

Activity best describes your project? (select **ONE** and mark with an X)

- | | |
|--|---|
| <input type="checkbox"/> Creation only | <input type="checkbox"/> Presentation only (performance or concert) |
| <input type="checkbox"/> Creation and presentation | <input type="checkbox"/> Presentation only (exhibition) |
| <input type="checkbox"/> Workshop/wānanga | |

PROJECT DETAILS

1. The idea / Te Kaupapa: What do you want to do?

2. The process / Te whakatutuki: How will the project happen?

3. The people / Nga tangata: Tell us about the key people and/or the groups involved.

4. The criteria / Nga paearu: Tell us how this project will deliver to your selected criterion: access and participation, diversity of young people.

PROJECT DETAILS (budget)

Other financial information

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 programs).

Date applied	Who to	How much	Confirmed/ unconfirmed

Tell us about other grants you have received through the Creative Communities Scheme in the past three years.

Date	Project title	Amount received	Project completion report submitted (yes/no)

Important Other financial information

Groups or organisations must provide the relevant audited accounts or 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 need include your reserves statement or policy

Applications and queries can be emailed to creative.communities@waidc.govt.nz

PART 3: DECLARATION

You must read and sign the following. Please place an X in each box to show that you have read the information and agree to each section.

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 this application is successful, I/we 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 (e.g. 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 Waikato District Council is bound by the Local Government Official Information and Meetings Act 1987

I/we consent to Waikato 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 details/photos 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. This consent is given in accordance with the Privacy Act 1993

NB: All applications by person/s under the age of 18 must be signed by applicant's parent or legal

Name

(Print name of contact person/applicant)

Signed:

Please accept this ticked box as part of my Declaration, along with my emailed application, as I'm not in a position where resources are readily available to print and scan.

(Applicant or arts organisation's contact person)

Date: