



Community Development Small Grants Fund Application Form 2018

The purpose of this grant is to assist charitable not-for-profit community welfare groups whose primary clientele come from within Palmerston North city boundaries. The funding available is to fund ***essential administration expenses*** to enable charitable not-for-profit ***welfare community groups*** to operate.

The Small Grants Fund is provided by the Palmerston North City Council (PNCC). The application and allocation process is conducted by the Palmerston North Community Services Council (PNCSC) in partnership with the PNCC.

PLEASE NOTE:

- **closing date - 4.00 p.m. Friday 22 June 2018**
- **allocations will be completed during September 2018**
- **your application will not be considered unless an accountability report has been received for previous applications**

Please read the guidelines before filling out this application and note:

- **services must be available to all persons regardless of their ability to pay**
- there is a cap of \$5,000 plus GST for any grant application; any request in excess of this will **not** be considered
- tick the boxes in the checklist provided with this application form to indicate the documents and information you have included/provided
- the application must meet all criteria
- ensure the form has been signed by two authorized signatories
- grants will **not** be made for expenditure already incurred

TWO copies of the completed application form and TWO copies of all documentation are required.

If you have any questions, please contact:

Palmerston North Community Services Council
Community House
77 King Street
PALMERSTON North 4410
Phone: 06 354 3809
Email: Rochelle.ross@pncsc.org.nz

1. Did you receive funding last year? Yes / No
 If yes, have you completed an **accountability report** for the last Community Development Small Grants Fund you received? Yes / No
 What year did you last receive a Small Grants Fund?.....
2. Name of organisation.
3. Postal address.....
 Physical address.....
 Phone..... Email.....
4. **Contact people must have full knowledge of this application and be available to meet with an interviewer. Meeting dates and times will be set in July or early August.**
 Main contact person
 Phone: Day Evening
 Second contact
 Phone: Day Evening
5. Key names of governance group.
 Chairperson
 Phone: Day Evening
 Board/Committee Member
 Phone: Day Evening
 Board/Committee Member
 Phone: Day Evening
6. How often does your governance group meet?
7. What is your legal status?.....
 What is your Charities Commission registration number? .. CC.....
 What is your Charities Commission registration date?
- If you do not have a legal identity, please explain why. Name your umbrella group and supply three letters of support (refer Guidelines D. Q8)**
8. Are you registered for GSTYes / No GST number?

9. Does your organisation have a commitment to the Treaty of Waitangi? Yes / No
 How do you demonstrate this?.....

10. State the purpose(s) of your organisation (ie: mission statement/vision)

11. What is your core business (ie: health, education, advocacy, etc.)

12. What services do you provide within the Palmerston North City boundary?

13. What areas/locations outside Palmerston North do you cover?.....

14. Are there any service costs that clients are expected to pay for?..... Yes / No
 If yes; what?

15. What other groups or organisations do you collaborate/partner/work with? ...
.....
.....
.....
.....

16. Has there been an increase/decrease in the use of your services in the past two - three years?..... Yes / No
Please explain.....
.....
.....

HAVE YOU APPLIED FOR FUNDING IN THE PAST 3 YEARS?

YES – go to question 20

NO – go to question 17

17. For organisations started within the last 3 years, please state the aims/objectives of your organisation.
.....
.....
.....
.....

18. Why was your group set up; what makes it special? (ie: what is the point of difference from those already established?).....
.....
.....
.....
.....

19. Please provide:
- Recent letters of support from **at least three** community groups' independent from your organisation
 - A progress report
 - A profit and loss statement and a balance sheet
 - A transaction summary
 - A projected budget

20. Tick the boxes best reflecting the following Palmerston North community outcomes that your service supports:

- people feel safe
- people have lots of learning opportunities
- the community is supportive; people and organisations work together
- people are well housed and healthy

21. When is the end of your financial year?

22. Have you had any money in the past two years from this fund, including emergency grants?..... Yes / No
If yes, please state year and amount.....

23. Have you acknowledged this grant in your annual report/financial statements? Yes / No

24. Did you apply for funding from Palmerston North City Council for the 2014/2015 financial year? Yes/No
If so how much did you receive: \$

25. Do you belong to a national organisation? Yes / No
If yes; which?

Note: For organisations whose accounts are generated from a head office, please provide financial records specific to the services delivered in Palmerston North.

26. Total of all bank accounts, including savings and investments: \$.....

27. Total of all monies tagged or committed for other purposes: \$

List the purposes and amounts:

.....
.....
.....
.....
.....
.....
.....

28. Please provide a total operational budget for your group's financial year. This will show how the requested funds have been calculated in relation to other income/costs. If you have clients outside the Palmerston North city boundaries, please refer Guidelines D. Q13.....

.....

.....

.....

.....

29. How much are you asking for? \$

Please itemize the amounts in the table below, ensuring that each item falls within **the guidelines**.

If your organisation is GST registered, list **GST EXCLUSIVE** costs. If you are not GST registered, list full costs **INCLUDING GST**.

ITEM	LAST YEAR'S GRANT	LAST YEAR'S EXPENSE	THIS YEAR'S BUDGET	AMOUNT REQUESTED
AUDIT: or financial review	\$	\$	\$	\$
COMMUNICATION: phone, internet, advertising	\$	\$	\$	\$
ENERGY: electricity, gas	\$	\$	\$	\$
INSURANCE: assets, public liability	\$	\$	\$	\$
INTERPRETERS* volunteer expenses	\$	\$	\$	\$
RENT: venue hire	\$	\$	\$	\$
STATIONERY: photocopying, postage, printing, computer supplies (excluding software)	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

*This must not include wages for workers who have an on-going employment with your organisation.

30. Have you applied to any other funders requesting funds for any of the items listed? Yes / No

If yes, please give details of amounts applied for, name of funder applied to and the date when the outcome will be known

.....
.....

31. Use this checklist to ensure all required documents/authorizations are attached/enclosed.

- Accountability report for last year's grant (if applicable)
- Last financial year's audited/reviewed financial accounts, including the auditor's/reviewer's statement and a balance sheet
- Statement of income and expenditure (not more than 3 months old)
- Copies of all current bank account balance operating (front page of statement only showing total not transactions)
- Latest annual report, or if this is your first year of operation, a progress report
- Your organisation's total operational budget covering Palmerston North
- Financial records for services SPECIFIC to Palmerston North, where a head office handles your finances
- Letters of support from your umbrella group, if you do not have legal status
- 3 independent letters of support for **first time applicants**
- TWO copies of this application, including ALL required documentation to be sent/delivered to PNCSC
- Keep a copy of this application including ALL documentation for your records
- Application signed by TWO authorized signatories

NOTE: Signatories agree their organisation ensures that service delivery adhere to legislative requirements, including requirements under the Vulnerable Children Act 2014, Employment Relations Act 2015, Health and Safety Act 2015 and best practice standards.

32. Application to be signed by **TWO** authorized signatories:

We declare that the information provided in this application is true and correct.

Name

Position

Date.....

Signature.....

Name

Position

Date

Signature.....

If your organisation/group is not a legal entity, please have your umbrella group counter-sign this application.

Umbrella group

Name

Position

Date.....

Signature.....

Post or deliver to:

Palmerston North Community Services Council

Community House

77 King Street

Palmerston North 4410

to arrive no later than 4.00pm, Friday 22 June 2018.