

Creative Communities Scheme

Application Form

Funding for local arts projects

Ngā pūtea mō ngā toi te hautāinga

To submit your Creative
Communities Scheme
application please complete and
return this form to:

Creative Communities Administrator Mackenzie District Council info@mackenzie.govt.nz PO Box 52, Fairlie

BEFORE YOUR START

Read the <u>Creative Communities Scheme Application Guide</u> on the Website

Before you prepare your application you should read the *Creative Communities Scheme Application Guide*. 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

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: Type your answer here

- IMPORTANT DO NOT edit any text outside of these boxes
- If you are unable to type into the boxes provided please print a copy and complete by hand
- If you need more space, attach information to the back of this application form. Please include the section headings to help assessors.
- We recommend that you keep a copy of your completed application for your own reference.
- Contact the CCS administrator if you need advice on your application (see contact details on the cover page).

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

| My project has an arts focus |
|--|
| My project takes place in the local authority district that I am applying to |
| I have answered all of the questions in this form |
| I have provided quotes and other financial details |
| I have provided other supporting documentation |
| I have read and signed the declaration |
| 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 gre | up? Individu | al G | Group | | | |
| Full name of applicant: | | | | | | |
| Contact person (for a | | | | | | |
| Street address/PO Box: | | | | | | |
| Suburb: | - | Town/City: | | | | |
| Postcode: | | Country: | New Zealand | | | |
| Email: | | | | | | |
| Telephone (day): | | | | | | |
| All correspondence will be sent to the above | mail or postal add | ress | | | | |
| Name on bank account: | | GST | number: | | | |
| Bank account number: | | | | | | |
| If you are successful your grant will be depos | ed into this accour | nt | | | | |
| Ethnicity of applicant/group (mark | vith an X, you o | can select m | ultiple optio | ns) | | |
| New Zealand European/Pākehā: | Detail: | | | | | |
| Māori: | Detail: | | | | | |
| Pacific Peoples: | Detail: | | | | | |
| Asian: | Detail: | | | | | |
| Middle Eastern/Latin American/Africa | n: Detail | | | | | |
| Other: | Detail: | | | | | |
| Would you like to speak in support committee meeting? | 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 admin for how long | trator before you | go so you know | who you will | be speaking to and | | |
| How did you hear about the Creation (A) | e Communitie | s Scheme? | (select ON | IE and mark with | | |
| Council website | Creative NZ v | vebsite | Social | media | | |
| Council mail-out | Local paper | | Radio | | | |
| Council staff member | Poster/flyer/b | rochure | Word | of mouth | | |
| Other (please provide | | | | | | |
| detail) | | | | | | |

PART 2: PROJECT DETAILS

| Pro | ject name: | | | | | | |
|-------------------------------|---|---------------|----------------------|---|---------------|--------------------|--|
| Brief description of project: | | | | | | | |
| | | | | | | | |
| Pro | ject location, | timing and | numbers | | | | |
| Ven | ue and suburb | or town: | | | | | |
| Star | t date: | | | | Finish date | : | |
| Nun | nber of <i>active</i> (| participants: | | | | | |
| Nun | nber of viewers | s/audience m | nembers: | | | | |
| Whi | | mes three fu | nding crite | with an X) ria are you applying that is the project's r | • | our project meets | |
| | Access and and participat | • | | opportunities for loca | al communiti | es to engage with, | |
| | Diversity: Su | pport the div | erse artist | ic cultural traditions | of local com | munities | |
| | Young people: Enable young people (under 18 years of age) to engage with, and participate in the arts | | | | | | |
| Artf | orm or cultur | al arts pract | ti ce : (sele | ct ONE and mark wi | th an X.) | | |
| | Craft/object a | rt | Dan | ce | | Inter-arts | |
| | Literature | | Mus | ic | | Ngā toi Māori | |
| | Pacific arts | | Mult | i-artform (including | film) | Theatre | |
| | Visual arts | | | | | | |
| Acti | ivity best des | cribes your | project? | select ONE and ma | ork with an X |) | |
| | Creation only | | | Presentation | only (perfor | mance or concert) | |
| | Creation and | presentation | l | Presentation | only (exhib | tion) | |
| | Workshop/wā | inanga | | | | | |

PROJECT DETAILS

Project details

The boxes below will expand as you type. If you are completing this application by hand you may need to expand these boxes *before* you print this form and/or add additional sheets. If you do, please clearly label these additional sheets using the headings below.

| 1. | The idea/Te kaupapa: What do you want to do? |
|----|---|
| | |
| 2. | The process/Te whakatutuki: How will the project happen? |
| | |
| 3. | The people/Ngā tāngata: Tell us about the key people and/or the groups involved. |
| | |
| 4. | The criteria/ Ngā paearu: Tell us how this project will deliver to your selected criterion: access and participation, diversity or young people. |
| | |

PROJECT DETAILS (budget)

5. The budget/Ngā pūtea

| See the CCS Application Guide for more detail on how to complete this section | | | | | n. |
|---|-------------------------------|----------------------------------|-------------|---|---|
| Are you GST registe | ered? | Yes | | Do NOT include GST in your budge | t |
| | | No | | Include GST in your budget | |
| Project costs | | s, venue l | | s of your project and include the details, promotion, equipment hire, artist fees an | |
| Item eg hall hire | Detail eg | 3 days' hi | ire at S | \$100 per day | Amount eg \$300 |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| Total Costs | | | | | \$ |
| Total Costs Project Income | sale of a | rtwork, o | ther g | me you will get for your project from tick grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, |
| | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other | et sales, |
| Project Income | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. |
| Project Income | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. |
| Project Income | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. |
| Project Income | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. |
| Project Income | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. |
| Project Income Income eg ticket sales | sale of a Do not in | rtwork, of | ther g | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. Amount eg \$3,750 |
| Income eg ticket sales Total Income | sale of a Do not in | rtwork, of | ther ge amo | grants, donations, your own funds, other ount you will be requesting from CCS. | et sales, fundraising. Amount eg \$3,750 |
| Income eg ticket sales Total Income Costs less income | Sale of a Do not in Detail eg | rtwork, of nclude the 250 ticker | ther ge amo | grants, donations, your own funds, other bunt you will be requesting from CCS. | et sales, fundraising. Amount eg \$3,750 |

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 programmes).

| 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) |
|------|---------------|-----------------|--|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Other financial information

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

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. | 1 | | | | | |
| 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 (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 Mackenzie District Council is bound by the Local Government Official Information and Meetings Act 1987 | | | | | | |
| I/we consent to Mackenzie 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. | l _ | | | | | |
| 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 <u>must</u> be signed by applicant's parent or legal guardian. | | | | | | |
| Name | | | | | | |
| (Print name of contact person/applicant) | | | | | | |
| Signed: | | | | | | |
| (Applicant or arts organisation's contact person) | | | | | | |
| Date: | | | | | | |