Form Preview

Welcome / He mihi

* indicates a required field

Important information

Please check which <u>local board area</u> you are in, read through the local board <u>grant programme</u> and <u>applicant guide</u> before completing this form. These tell you:

- Who is eligible to apply
- What we don't fund
- What information you will need to include in your application.

All applications must be completed and submitted using this online application form. Remember to save as you work.

If you have limited computer access, you can <u>book a computer</u> or <u>librarian</u> for one hour in one of <u>Auckland's libraries</u>. Ensure you take all the required documents saved on a memory stick so you can upload these in your application form.

Contact a grants advisor at communityfunding@aucklandcouncil.govt.nz or phone 09 301 0101 if you need advice on your application.

Please note technical support is only available from 8:30 am to 5:00pm weekdays.

To find what local board area your project is taking place in please visit the <u>local</u> board finder tool.

Ine	rou	nd	you	ı are	appi	yıng	to is:	
Thin	د ماما	io s	000	برا مر				

This field is read only.
The round this submission is in.

Please confirm that the above is the correct round that you would like to apply to

If the above is not the correct board, please stop this application and refer to the Auckland Council website for the correct board. We cannot transfer this over.

Documents you may need to complete this application form:

- audited accounts, financial statements, annual report
- minutes from your organisation or a letter from an officeholder authorising your to apply
- letter of acceptance/agreement if your project is being delivered in early childhood education providers or schools
- landowner's approval and permits for all kinds of physical works (whether council or private owner)
- if your project is on public land, permit (such as the <u>Auckland Council land owner approval</u>, <u>event permit</u> may be required before funding is granted

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- evidence of bank account number (make sure this includes bank holder's name, account number and is within 90 days. You can find more information here)
- quotes/ past receipts for the items/costs you would like to be covered by the grant, this includes employment contracts or payslips.
- a supporting excel spreadsheet with details how the funding will be spent.
- if your group does not have a legal status and chooses to have another group act as an umbrella, you will need the legal information, bank details and a letter of support from the umbrella group

Privacy

Any personal information that you provide in this form will be held and protected by Auckland Council in accordance with our <u>privacy policy</u> and with the Privacy Act 2020. Our privacy policy explains how we may use and share your personal information in relation to any interaction you have with the council, and how you can access and correct that information. We recommend you familiarise yourself with this policy.

A summary of the information in this application will be presented to the local board at a public workshop. Information includes the project seeking funding for, expected outcomes, the funding history of the applicant and costs applied for. The name of the applicant and legal status will be included, though addresses and contact details will not be.

the personal information collected in this application will be used to ensure we have points of contact for this application and to give the local board the best idea of what the project is trying to accomplish and what staff are involved.

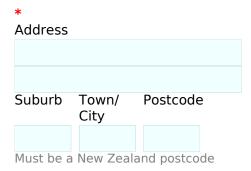
A brief summary of this application may also be used for media releases. The accountability information may also be used in good news stories in the media, though this is voluntary and permission is asked on the accountability forms.

For an example of the details given you can find minutes and attachments at the <u>Auckland</u> <u>Council Agenda and Minutes page</u>.

Contact Details / Ngā korero whakapā

* indicates a required field

Physical Address



Please click here for the postcode finder website

Contact details

Typically when we contact you, we will use the email of the person filling out this application and often include the two contacts below.

This needs to be two different people.

Funding Representative * First Name	Last Name	Project Signatory * First Name	Last Name
		dThis person will sign the	funding agreement,
be listed as the contact. available for contact.	Please ensure they are	please ensure they have group.	financial authority in you
Position held in organisation (if a	pplying as an organisation) *	Position held in organisation (if a	pplying as an organisation) *
Contact Number *		Contact Number *	
Email address *		Email address *	

Applicant details / Ngā korero whakapā mo te kaitono

* indicates a required field

Having a legal structure means your organisation has its own legal identity, it can include:

- Incorporated societies
- Trusts registered under the Charitable Trusts Act 1957
- Charities that are registered with Charities Services
- Companies with charitable purposes / social enterprises
- School board of trustees
- Māori trust boards.

If you do not have a legal structure you can still apply for a grant.For any questions, please contact a grants advisor at communityfunding@aucklandcouncil.govt.nz

If you are using an umbrella organisation, please choose "informal group/no legal structure"

What is the	legal struct	ture of your	organisatio	n/group? *		
O Incorporated Society		Registered	LimitedLiabilityCompany	○ School	○ Maori Trust	Informal group/ no legal structure
An informal gr	oup may also k	e a "not for pr	ofit community	group"		

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Applicants with no formal legal structure (eg individuals or groups who are not an incorporated society) may apply for a grant up to \$1,000.

Umbrella organisations are organisations with a formal legal structure that have agreed to receive and administer the grant on the applicant's behalf. For example an umbrella organisaiton needs to be an incorporated society or charitable trust.

Please indicate which category your a ○ Applying for up to \$1,000	<pre>pplication falls into: *</pre>	1 and over
Applicants with no formal legal struct either:	ure seeking grants ove	r \$1,001 need to
Select one option below * Nominate an umbrella organisation who behalf - the umbrella organisation will be le expenditure of the grant. Reimbursement - Agree that you will project went before payment is released. If you are unsure, or if you would like to learn montact a grants advisor at communityfunding@	egally accountable to Aucrovide receipts and informore about nominating an un	kland Council for the nation on how your nbrella organisation, please
Are you/your group GST registered? * O Yes Auckland Council grants are not subject to GST, processing system	○ No , your GST status is required	for our payment
What is your GST number? *		
Must be a number.		
What registration numbers apply to ye	our organisation?	
(Please provide all applicable numbers)		
NZ Companies Register *		
The NZBN provided will be used to look up check that you have entered the NZBN cor		. Click Lookup above to
New Zealand Companies Register Information		
NZBN		
Entity Name		
Registration Date		
Entity Status Entity Type		

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Registered Address	
Office Address	
Please click here to visit the Societies and Trusts website	
Charities NZ Registration *	
Charties NZ Registration	
The Charity Registration Number provided will be used to look up the Click Lookup above to check that you have entered the Charity Regist correctly.	
New Zealand Charities Register Information	
Charity Registration	
Number	
Organisation Name	
Other Names	
Status	
Street Address	
Postal Address	
Telephone	
Fax	
Email	
Website	
Date Registered	
Please click <u>here</u> to visit the Societies and Trusts website	
New Zealand Companies Office incorporated society number	*
Must be a number.	
Organisation objectives	
Please describe what you are seeking funding for in three to	four sentences *
Word count:	
This should focus only on what you are applying for not other work you/you	r organisation does Plea

What activities or services do you/ your organisation provide? *

be clear on what the project is doing, not expected outcomes or frameworks surrounding the project.

Word count: Must be no more than 200 words. This should be a general overview of your group and does not need to be specific to this project.
What expertise do you/your organisation have in delivering similar projects? *
Word count: Must be no more than 120 words. Has your group ran similar projects to this before? How often and how successful were they?
Umbrella Organisation Details / Ngā kōrero mō tō Rōpū Matua
* indicates a required field
Name of your Umbrella Organisation * Organisation Name
Umbrella Primary Address *
Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be New Zealand
Contact person * First Name Last Name
Position in organisation *
Contact number *
Email address *
Email address *

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Attach a file:

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	U	ш				VΙ	ew	

What is the legal status of your umbrella organisation * O Incorporated society O Charitable trust O Limited liability company Your umbrella group must have a legal structure
NZ Companies Register *
The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.
New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address
New Zealand Companies Office incorporated society number * Must be a number
Charities NZ Registration *
The Charity Registration Number provided will be used to look up the following informatio Click Lookup above to check that you have entered the Charity Registration Number correctly.
New Zealand Charities Register Information
Charity Registration
Number
Organisation Name
Other Names
Status
Street Address
Postal Address
Telephone
Fax

Email Website
Date Registered
Local Board Details / Ngā kōrero e hāngai ana ki tō Poari ā-Rohe
* indicates a required field
Albert-Eden Priorities
Select the main Albert Eden priority your project supports *
Aotea/ Great Barrier Priorities
Select main Aotea Great Barrier priority your project supports *
Devonport-Takapuna Priorities
Select the main Devonport/Takapuna priority your project supports
Henderson-Massey Priorities
Select the main Henderson-Massey priority your project supports *
Hibiscus and Bays Priorities
Select the main priority your project supports
Howick Priorities
Select the main Howick priority your project supports *
Main Etil i Dain di in
Kaipātiki Priorities
Select the main Kaipātiki priority your project supports *
Māngere-Otāhuhu Priorities

Select the main Mangere-Otahuhu priority your project supports *
Manurewa Priorities
Select the main Manurewa priority your project supports *
Māungakiekie-Tāmaki Priorities
Select the main Māungakiekie Tāmaki priority your project supports *
Ōrakei Priorities
Select the main Ōrakei priority your project supports *
Ōtara-Papatoetoe Priorities
Select the main Ōtara-Papatoetoe priority your project supports *
Papakura Priorities
Select the main Papakura priority your project supports
Puketāpapa Priorities
Select the main Puketāpapa priority your project supports *
Upper Harbour Priorities
Select the main Upper Harbour priority your project supports
Waiheke Priorities
Select the main Waiheke priority your project supports *
Waitākere Priorities

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liability Insurance)

• needs power and vehicle access

• has food stalls or vendors (including catering or food trucks)

Select the main Waitākere priori	ty your project s	supports *		
Waitematā Priorities				
Select the main Waitematā prior	ity your project	supports *		
Whau Priorities				
Select the main Whau priority yo	ur project supp	orts *		
How does your project support th	ne selected Loca	al Board pri	ority? *	
Project Details / Ngā pāron	ngo mahinga			
* indicates a required field	igo manniga			
What is the main project type?				
If your project/activity has more than you do not know the main one, pleas and definitions.				
* O Arts and O Community O Environce	○ Even onment	ts O His Herita		Sport and recreation
You will need to choose "Events" as p	project type and g	<u>et a permit,</u> i	f your pro	ject:
is for more than 150 peoplewill be on any public open space	like a park, road	or the water		
is a commercial activitycould cause damage to public pr	roperty, the enviro	onment or su	rrounding	roads in any
way • will involve alcohol, excessive no				
will generate any form of wastewill put the public and their safe	ty at risk (the eve	nt organiser i	must take	out public

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• will have large structures like bouncy castles, stages, marquees or signage. You may need building consent - see Other permits and licenses you may need to check.

Please ensure Elected Members are **invited** to the event, should your project is funded by Local Board.

Do you have an event permit? * ○ Yes ○ No
Aotea/Great Barrier
Note: If you'd like to apply for the Aotea/Great Barrier Capital Round, please select Yes below.This included projects for:
 Buildings, structures, plant, services, infrastructure or equipment Upgrades or refurbishments to existing facilities New or upgraded alternative power systems, low energy appliances and equipment, rainwater collection systems, provision of safe drinking water, upgrade of septic and sewage systems
Please see the grants programme for more information.
 Is this a capital project? * Yes, this is a capital project No, this is not a capital project
Project title *
Must be no more than 10 words
Project location *
This means the building name, street address, location of event or venue where the project will happen.
Is your project maintaining, renovating, or altering a council owned building or park? *
○ Yes If you are hosting an event or activity or programme on council park or building, you may continue with your application. If this project includes building maintenance or renovation to a council owned building or property you must seek land owner approval before applying.
Please upload your council lease agreement if you are undertaking building works or maintenance. Attach a file:

Please attach proof of land owner approval * Attach a file:
This could be an email chain with an appropriate council representative, or a screenshot of the website approving this work or the section of the lease agreement stating you can do this work.
What are the start and end dates for your project?
If your project starts before the "Project to Occur After" date found on the <u>Local Board Grant programme</u> for the board you are applying to, your grant may be rejected or the amount funded reduced.
Start date *
Must be a date. The project start date should be no earlier than the decision date.
End date *
Must be a date.
Community benefits
What are the community benefits of your project? *
Word count: Must be no more than 200 words.
Include how the wider community can access your project
How will you measure these benefits? *
Word count: Must be no more than 150 words. Describe three changes you will see if the expected outcomes of the project occur
Collaborating organisations or individuals
Will any other organisations or individuals be collaborating with you on this project, including volunteer groups? Please list them and their role.
Collaborating organisation/individual Contribution to project

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Project plan / Mahere mahinga	
Please list the steps you will take for this project. Eg. Marketing, purchasing goods, runnin workshop 1, running workshop 2, reporting	g

lasks - what will you do?	By when (date)?	
Healthy environment approach		
Please tell us how you will promote a healthy environment approach for your project? Promote smoke-free messages Include waste minimisation (zero waste) messages Healthy options for food and drink, including water as the first choice Encouraging active lifestyles including movement or fitness programmes Encourage the reduction of carbon emissions or increase community resilience to the impacts of climate change* *e.g. increasing local food production and food waste reduction; increasing active transport options; local tree planting and streamside revegetation; education about sustainable lifestyle choices		
Please explain how you will promote a h	ealthy environment approach	
Word count: Please click <u>here</u> to find more information on healt	hy environment principles	
Specific Environment and Histori He Kōrero Motuhake mō te Kaup		
* indicates a required field		
Is your proposed project: * O A continuation of previous work	○ A new initiative	
Does your project have an existing mana O Yes e.g. conservation plan or restoration plan	agement plan? * O No	
Please attach existing management plar Attach a file:	1	

Please provide details of any Auckland Council staff members you have been in contact with regarding this site

Who is going to manage and maintain th	ne project when it is completed? *
Must be no more than 100 words	
Does any part of your project require a sarchaeological? *	statutory consent e.g. resource or
○ Yes	○ No
Environment applicants only	
Does your project include work on: * ○ Non-Council ○ private land ○ both owned public	○ Māori land ○ Council land ○ Other:
land For work on Council owned land please contact a include Māori customary, freehold or reserve land	
If you do not own the project site please Attach a file:	e attach permission from the landowner
What are the environmental benefits of	this project? *
Word count: Must be no more than 100 words. Must be no more than 100 words	
Please provide current photos of your p Attach a file:	roject site, if applicable.
Please provide a plant list with details of Attach a file:	on species and quantity, if applicable.

Please provide details of any current or planned future legal protection arrangements for the project site e.g. QEII, Nga Whenua Rahui, DoC or conservation covenants, or land management agreements

Historic Heritage applicants only
How is this building, site or object used? *
Must be no more than 100 words
Please attach photos of the heritage item. Other information such as drawings and historical photos that may assist in the understanding of the project should also be included * Attach a file:
What are the heritage values of the building site or object? eg historical or cultural values ${\color{red}^*}$
How urgent are the works to avert severe deterioration of the heritage item? *
Is the heritage item accessible or visible to the public, and how do you intend to promote the project in the community? *
Consider if people can physically access the site, is access available year round or during events, who hours is the site open, is the site visible from the street.
Project Budget / Te tahua ā-kaupapa whakahaere
* indicates a required field
Each round may have a minimum and a maximum amount (investment approach) you can apply for. You can check the local board grant programme for these limits. Applications outside of these limits may result in reduced funding or being declined.
How much funding are you requesting in this application? *
\$ Must be a dollar amount.
What is the total financial support you are requesting in this application?

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What part of the pro	ject are you reques	ting funding for? *	
Word count: Must be no more than 10	0 words.		
Is there a cost of pa ticket cost or progra		roject? If so, please	state the cost. (e.g.
(e.g. ticket cost or progra	mme fee)		
Table one: expens	ses/costs for the I	project	
Please provide costs local board, you mustor.			unding for from the r each item requested
If this is for facilitator/ considered as sufficien		lip/employment contra	ct can also be
Note : Koha is a specifi not count as koha and			
Please list the items for your requested funding (e.g. venue hire, advertising costs)	Total cost of item	Amount of funding requested from the local board	
Costs)	\$	\$	
		. Must be a dollar amoun	nt.
If you are unable to why.	provide quotes for a	any of the above cos	ts, please explain
Quotes are required and them please tell us above		you less likely to be fund	ded. If you cannot provide
Table two: project	income		
This section tells us ab If your organisation cha charge the participants	arges participants to a	ttend your project/eve	nt, how much do you
Do not include funds r	equested from this ap	plication or application	s made to other

Amount

Project income (e.g. 100 tickets @ \$20 each, registration 20 people \$5.00 each)

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Please seperate each cost out e.g. ticket sales one	Must be a dollar amount.
line and then art sales on the next	

Table three: other funding sources for the project/activity

This section tells us about any other funding that you hope to receive for this project/ activity, e.g. contestable funding from Foundation North, Department of Internal Affairs, Central Government contracts. Please include applications made to other local boards.

Funding organisation or individual	Amount	Pending / approved
	\$	
	Must be a dollar amount.	

Donated materials for the project/activity

Please provide details of any donated materials which is contributed to this project (donated equipment, materials, venue hire) and the value of this item.

Note: Local Board funding can not be requested towards items provided as non-monetary support.

Description of materials	\$
	\$
	Must be a dollar amount.

Volunteer numbers and time

Please detail the number of hours in volunteer time, contributed to this project and the value of this contribution. The value of volunteer time can be calculated using the living wage.

Note: Local Board funding is not part of the volunteer time.

Number of volunteers	Total number of volunteer hours	Total value of volunteer time
		\$
Must be a number.	Must be a number.	(Based on the living wage for 2019) This number/amount is calculated.

Funding summary

Confirmed or approved as at the time of filling out this application.

Total Expenditure Amount	\$
	This number/amount is calculated. Total of table one
Total income amount	\$

	Total of table two
Total other funding	\$
sources	This number/amount is calculated.
	Total of table three
How much are you/	\$
your organisation contributing? (Excludes income from 'Table three') *	Must be a dollar amount. e.g. \$1,227.81
If the local board(s) is unable ahead? * • Yes	e to fund this application, would your project still go
If only part of your project caplan? *	an be funded, how would you amend your project
What is the minimum amoun to proceed? *	t the local board(s) need to support for your project
\$	
Must be a dollar amount.	
Please provide details on hor contribution?	w you will publicly acknowledge the local board's
Word county	
Word count: Must be no more than 120 words.	
Demographics / Ngā ta	tau taupori
* indicates a required field	
Participants	
Please specifiy the number o	of people affected by this project (not including staff)
This could be people attending an e	want or handsting from this project

What length of time are you expecting this amount of attendees						
Such as the length of the project, over a year, etc.						
What percentage of the participants are from the local board area that you are applying to?						
Must be a number and between 0	and 100.					
Other boards benefiting						
If you are requesting funding, or your project will impact other board areas apart from the one you are currently applying to, please state below.						
Local board benefiting	Estimated reach from this area (%)	Amount requested from this board				
	Must be a number.	Must be a dollar amount.				
Māori Outcomes Auckland Council provides funding for Māori and wider organisations to uplift Māori wellbeing and achieve better outcomes with Māori.						
Will your project/activity target Māori or Māori outcomes? * ☐ Māori led - either a Māori organisation that is applying or Māori directed (came about as a request from Māori) ☐ Māori involvement in the design/concept ☐ Māori focus - tikanga (practices), mātauranga (knowledge), reo (language) ☐ Māori participation - Māori priority group, target group, high representation or Māori staff						
delivering No Māori outcomes identified Maori outcomes include Maori events, Maori sculpture and public art or protection of Maori cultural heritage eg waahi tapu. Marae, Improving Maori social, economic, and cultural well-being. Uses matauranga and tikanga Maori and works with mana whenua or Maori organisations to produce shared outcomes.						
	oject/activity will achieve th	ne above Māori outcomes *				
Word count: Must be no more than 120 words.						

To help council and local boards better understand who will benefit from this project, please indicate below who this is targeted at. This is for internal use only.

This doesn't exclude any groups, but if you have anything that will support any groups, you can add it here.
Will your project be accessible to people with disabilities? *
○ Yes ○ No
Long term disability is defined as lasting six months or more and stops people from doing everyday things other people can do.
Please explain how your project/activity is accessible for people with disabilities
Word count:
Must be no more than 150 words
Supporting documentation / Ngā puka tautoko
* indicates a required field
Financial attachments
Applicant name must match the name on the bank account information supplied.
Applicant name mast mater the name on the bank account morning to supplican
All information must be less than 90 days old.
All information must be less than 90 days old. You can find the information we need on your bank information here.
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip Certified bank statement (certified means bank details stamped and signed by the bank
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * O Bank deposit slip O Certified bank statement (certified means bank details stamped and signed by the bank teller) O A letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip Certified bank statement (certified means bank details stamped and signed by the bank teller) A letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number Print screen or image capture of an on-line bank statement confirming the bank account
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * O Bank deposit slip O Certified bank statement (certified means bank details stamped and signed by the bank teller) O A letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number
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All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip Certified bank statement (certified means bank details stamped and signed by the bank teller) A letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number Print screen or image capture of an on-line bank statement confirming the bank account
All information must be less than 90 days old. You can find the information we need on your bank information here. The grant will be paid to this account if your application is successful. Please attach ONE of the following: * Bank deposit slip Certified bank statement (certified means bank details stamped and signed by the bank teller) A letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number Print screen or image capture of an on-line bank statement confirming the bank account holder name and bank account number. This must include the bank logo and URL

Please attach proof of bank account details for the umbrella organisation *

Attach a file:	
Pank proof should be loss than 00 days old	
Bank proof should be less than 90 days old.	
Once of setting the distribution of the set	
Organisation/Individual name * Organisation Name	
Organisation Name	
Must match the name on the bank account inform	ation supplied unless you are using an umbrella
organisation	
	atements from the most recent financial
year Attach a file:	
Attach a nie.	
	nt is not required for Quick Response rounds but you
can still add it to strengthen your application	
Diagram and a discount of forms and a discount of	anklan ana lakkan firana an afficalialan
Please upload minutes from your organi	sation or a letter from an omcenoider
authorising your application * Attach a file:	
Attach a nie.	
Supporting project documentation	
Do you have any other information to su	pport your application?
Do you have any other information to su	pport your application?
Do you have any other information to su	ipport your application?
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Word count: Must be no more than 100 words. Must be no more than 100 words Attach any supporting documents you for Attach a file: Are you working with early childhood exceptions and the supporting documents are supported by the supporting documents and the supporting documents you for Attach a file:	eel might help us understand your project. ucation providers or schools? *
Word count: Must be no more than 100 words. Must be no more than 100 words Attach any supporting documents you for Attach a file:	eel might help us understand your project.
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Form Preview

Website address	
Facebook page	
Declaration and privacy / tapu o ngā kōrero	Ngā whakīnga whai pānga me te noho
* indicates a required field	
Declaration	
	e right to subsequently decline an application or request ove information is found to be incorrect.
	our/my knowledge the information contained in
this application is correct * ○ Yes	○ No
	anted will only be used for the activity described in
this application * ○ Yes	○ No
and supporting paid invoices ar	nit to the local board an accountability report nd receipts (GST exclusive) that applies to GST ays of the completion of my/our activity *
	f our/my knowledge I/we have no perceived , iterest in applying for or using any grant funding * ○ No

For guidance on whether you have a perceived, potential or actual conflict as a result of applying for and using grant funding you should consider the following matters - if in doubt you should declare the conflict.

A conflict of interest could arise where you (the applicant) have a responsibility as a result of receiving council grant monies. This could affect another responsibility, duty or relationship you may also have.

For example

- If you are an Auckland Council employee/local board member or a councillor
- If your organisations committee or board member is an Auckland Council employee/ local board member.
- Personal or family relationships that you have
 - with council employees
 - with council contractors
 - organisations or persons that you will procure services from with the grant monies

Form Preview

- Financial relationships
 - e.g. investments that you have in entities that you will procure services from with the grant monies
- Employment relationships or membership of clubs
 - e.g. you intend to procure services with the grant monies from your employer or a club you are a member of who will benefit financially from the arrangement.

if you have answere	d no to any of the ar	oove, piease provide	details below:			
Privacy						
 I/We understand that Auckland Council is bound by the Local Government Official Information and Meetings Act 1987 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 understand that I/we have the right to have access to this information I/We undertake that I/we have obtained the consent of all people involved to provide these details. 						
* Accept		Decline				
When your application is submitted you will receive an automatic confirmation email that the application has been received from Smartygrants. If you do not receive an email confirmation, please check to see if the email has been treated as "spam".						
If you need assistance please contact the Community Grants Advisor at communityfunding@aucklandcouncil.govt.nz or phone 09 301 0101.						
Are you a first time ○ Yes	applicant? *	○ No				
How did you find ou ○ Council website ○ Council mail-out ○ Council staff	t about this grant?	RadioSocial mediaWord-of-mouth	Our Auckland print or onlineOther:			
member	S - 2222,, 2.	<u> </u>				

What happens next?

The Auckland Council Grants team will spend the time from the round closing date until shortly before the decision date assessing your application. During this time we may send you questions about your application.

The local board members for the board you have applied to will then review your application and fund, partially fund or decline based on the priorities set for the board and the strength of your application compared to others in the round.

After the decision date (found on the local board programme) you will receive an email informing you of the outcome. This may also include some conditions, such as the funding may only be used towards certain parts of the project.

If you have used an umbrella group the money will be sent to them and you will provide them with proof on what you need to purchase, then they will organise payment.

Please hold on to any receipts, bank statements or other ways of showing the funding has been spent, as within two months after the end date of your project you will need to complete an accountability form. This does not include unpaid invoices.