

Project Application Form

For Office Information Only
Number:



Name of Applicant:

Return to:

Motueka Arts Council, Inc.
PO Box 121
Motueka 7143

Important information:

For events/projects that commence one month after the closing date, with a maximum grant of \$500.

Please complete one application per project

- As applications are photocopied we would appreciate you using a black pen, thank you.
- Late applications will not be accepted.
- Application forms will be accepted by the Motueka Arts Council on the last day of each month except in December.
- Projects should not commence within one month of the closing date.

First Check your eligibility

The priorities and eligibility criteria are set out in number order in the accompanying guidelines. Please read them carefully before filling out this form then check that your project meets the eligibility criteria.

Please indicate;

Yes

PRIORITIES

- a) Will your project increase participation in the arts at a local level,
- b) or increase the range and diversity of arts available to your local community?
- c) enhance and strengthen local arts sectors

ELIGIBILITY CRITERIA

- 1 Is your project an arts and cultural project?
- 2 Will your project take place within the wider Motueka District and / or produce benefits which are largely experienced within your district?
- 3 Your project cannot start before it has been assessed.
- 4 Your project cannot have already received Creative New Zealand funding for the same purpose.

1

Tell us about yourself

- *1.1 Full name of individual or organisation: _____
Commonly used name (if different from above): _____
- 1.2 Street address: _____
- 1.3 Postal address: _____
- 1.4 Telephone/fax number: _____
Email: _____
- 1.5 **Contacts:** Please name two people we can contact if we need further information about this application
- Name: _____ Telephone (day) _____
Fax _____
- Name: _____ Telephone (day) _____
Fax _____
- 1.6 What are your organisation's objectives?

- 1.7 Is your organisation a legally constituted trust or incorporated society? **Yes** **No**
How many members does your organisation have? _____
What is your annual membership fee; if any? \$ _____
- 1.8 Are you registered for GST? **Yes** **No**
If yes, your GST number is _____/_____/_____
- 1.9 What is your primary cultural or ethnic affiliation?
Both groups and individuals need to answer this question.
 Maori Pacific Island NZ European/Pakeha Other [specify] _____
- 1.10 Please name a referee and/or supply a letter of support for your project:
Name: _____ Telephone (day) _____
Please have the referee's permission to submit their name. Inform them of the project.

2

The Project

- 2.1 Is the project aiming to involve a particular cultural or ethnic group? If so is it:
 Maori Pacific Island Other [specify] _____
- *2.2 Does your project target a particular age group? Please tick appropriate box
 under 25 over 25 general
- 2.3 Please estimate the percentage of people in the Tasman District who will benefit from this project

3 Money and resources

3.1 It is expected that applicants will make a financial contribution to the project.

How much money are you applying for? \$ _____

3.2 Outline the costs of your project. You may include a percentage of overhead costs, including salaries (except volunteer labour) which apply to the project. Where appropriate, please include written quotes. Organisations not registered for GST should include GST with their estimates.

Project Costs List all the costs eligible for this project eg.	\$	Income How will your group contribute financially to the project? eg.	\$
Equipment		Sponsorship	
Venue hire		Fees/subscriptions	
Promotion		Fundraising	
Materials		Loan/mortgage/debenture	
Other		Cash savings	
		Donations of material	
		Other	
Total cost of project is		Your contribution is	

3.3

3.4 Are you seeking (please tick one box)

a grant guarantee against loss

3.5 Please specify who you would like the cheque made out to

4 Financial background

4.1 If you are an existing group or organisation, provide details from your last set of annual accounts

4.2 Provide details of any grants, loans or guarantees against loss you have previously received through the Creative Communities New Zealand Scheme.

Date	Project	Type	Amount

5 Final check

I declare that the information supplied here is correct. If the application is successful, I/we agree to:

- i) return the project report form (which will be sent to me in due course by the Motueka Arts Council)
- ii) participate in any funding audit of my organisation or project conducted by the Motueka Arts Council.
- iii) use Motueka Arts Council and Creative Communities NZ logos in advertising and publicity material.

I consent to the Motueka Arts Council collecting the personal contact details provided above, retaining and using these details and disclosing them to Creative New Zealand for the purpose of review of the Creative Communities New Zealand scheme. I undertake that I have obtained the consent of the other contact person to provide these details. We acknowledge our right to have access to this information. This consent is given in accordance with the Privacy Act 1993

Name _____ Signature _____