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Eligibility

* indicates a required field

Programme This field is read only.

Applicants: please note

Before completing this application form, you should have read the <u>fund eligibility</u> (see fund name above).

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and we understand if you are eligible for this grant. It is crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact **07 578 5094** during business hours or email info@tect.co.nz

If you do contact us throughout the application process, please quote the application number below:

Application Number			
This field is read only.			

Confirmation of Eligibility

I confirm that the applicant ...

- has read and understands the fund guidelines
- is able to demonstrate alignment between their project and the aims of this fund
- is a not-for-profit organisation (includes educational institutions such as schools and kindergartens)
- is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- will allocate funding to activities that occur in or benefit those in TECT's district.
- is able to demonstrate financial viability
- have not received funding from TECT in the past 12 months. Is not an application for
- for an Individuals
- High performance or elite sports or arts activities. Kapa Haka events are notsubject to this exclusion.

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- Seeding investments for businesses
- Advocacy, lobbying, or campaigns where this is the primary purpose of the organisation
- Political organisations, residents associations or lobby groups
- Projects where local or central government would be the natural source of funding
- Commercial organisations or commercial events
- for Informal Groups
- Sponsorships
- Business case or feasibility studies for any projects
- Equipment and IT infrastructure where there is no community benefit
- Maintenance of facilities and equipment
- Repayment of debt
- Where the funds will be passed on to another organisation (third party funding)
- Sports uniforms or uniforms in general.
- Travel, but may make an exception for travel to events of national/international significance.
- International travel
- Repayment of debt
- For overseas aid

Please select below: *

- Local/Central government core business and administration buildings
- Core business of Councils and Council Controlled Organisations
- Core education & health provision
- Funders or fundraising events/activities, or building endowments (i.e. to build capital bases).

○ No

- Retrospective funding applications (As at the date the funding round closes)
- Social business initiatives that create direct competition with other businesses.
- Projects that support the spiritual activity of religious organisations
- Fund research except where the cost may legitimately be part of a project or programmeevaluation.

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation postal address Address
Organisation website
Must be a URL.
ORGANISATION CONTACT DETAILS
Contact name * First Name Last Name
This traine Last raine
Contact position *
Contact phone number *
Must be a New Zealand phone number.
Email *
Must be an email address.
Must be all elliali address.
About Your Organisation
* indicates a required field
ABOUT YOUR ORGANISATION
Describe your organisation's purpose and tell us about types of services, programmes or activities you provide *
Word count: Must be no more than 300 words.

PEOPLE INVOLVED IN YOUR ORGANISATION

Total FTE *
Must be a number. Full time / Part time
Total number of volunteers *
Must be a number.
ORGANISATION LEGAL STRUCTURE
Please specify your legal status * ☐ Registered Charity ☐ Incorporated Society ☐ Company - with a charitable purpose ☐ School ☐ Other No more than 1 choice may be selected.
When was your organisation established? *
Name's your organisation has operated under
NEW ZEALAND CHARITIES SERVICES INFORMATION
If your organisation is a Registered Charity, please enter your details below. If you do have a CC number, please make sure your details in the application match those held by Charities Services.
Charities Commission Registration number (if applicable) *
Correct format for CC Number is CC12345
INCORPORATED SOCIETY INFORMATION
If you are not a registered charity or an Incorporated Society that is a charity, please enter your Incorporated Society number.
Incorporated Society number
Correct format for Companies Office Number is 123456
Do you have tax exemption? ○ Yes ○ No

Please upload tax exemption letter Attach a file:
ORGANISATION FINANCIAL DETAILS
Upload latest annual financial statements * Attach a file:
Please attach your most recent annual financial statements including your Statement of Service Performance and Auditors report (where applicable – see below) If these are more than six months old, please upload a Year to Date profit & loss statement and balance sheet. Income and expenditure.
ORGANISATION IRD INFORMATION
Is your organisation registered for GST? * O Yes No
GST NUMBER
Please advise of GST number *
Example 123-456-789
ORGANISATION BANK ACCOUNT DETAILS
* Account Name
A convert Nivershore
Account Number Example 00-0000-000000-00
Please upload bank account confirmation *
Attach a file:
LEVEL OF RESERVES
While we understand holding some cash reserves is an appropriate and important business practice, we do look very closely at the level of reserves held by an organisation and the type and level of funding requested.
What are your cash reserves at the time of application? *
\$ Must be a dollar amount.

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Please comment or	your cash	reserves	and if they	cannot be	used for	this	project
please explain why							

Please note - Grants/donation for specific purpose or other tagged funding

What are you applying for?

* indicates a required field

What are you apply	/ina	for?	*
--------------------	------	------	---

- Operating Costs First Application (Community Development Fund)
- Operating Costs Repeat Application (Community Development Fund)
- O Equipment Purchase (Community Development Fund)
- O Project / Programme One off, defined start and finish (Community Development Fund)
- O Building Project Upgrade or new building (Community Development Fund)

Operating Costs - First Application

* indicates a required field

Operating Costs - First Application (Project details)

What will the grant be used for? *				
Word count: Must be no more than 300 words. Tell us about the activities/programmes TECT funding would support over the second support support over the second support support over the second support	he next year.			
Describe the experience your organisation has to effectively deliver the programme or project?				

Word count:

Must be no more than 300 words.

What other community organisations do you work, partner,	or collaborate with? *

Word count:

Must be no more than 300 words.

Are you aware of any similar services locally? *

This number/amount is calculated.

Word count:

Must be no more than 300 words. What is unique about your organisation?
Operating Costs - First Application (Benefits and Impact)
Why is this project / programme needed? *
Word count: Must be no more than 300 words. What supporting evidence is this based on? What are your current challenges?
What outcomes are you seeking to achieve? *
Word count: Must be no more than 300 words. What will TECT funding enable you to achieve that you can't currently?
How many clients/members interact with your organisation? *
How many people overall benefit from the work you do? *
Must be a number. Direct benefits - clients/members. Indirect benefits - wider whānau
Operating Costs - First Application (Financial details and budget)
In this section tell us the total of your operating budget, and how much you are applying to TECT for
The budget you provide must include all income and expenditure (confirmed and anticipated) must cover a 12 month period.
Total budget
\$ Must be a dollar amount.
Amount requested from TECT
\$ Must be a dollar amount.
% of total

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Upload budget * Attach a file:
Operating Costs - Repeat application
* indicates a required field
OPERATING COSTS - REPEAT APPLICATION (PROJECT DETAILS)
What will the grant be used for? *
Word count:
What are you planning on delivering over the next year? *
Word count: Must be no more than 300 words.
What were your key achievements and challenges over the last year? *
The first year hey demote ments and enumeriges even and last year.
Word count:
Must be no more than 300 words. Highlights and learnings
Have there been any changes to governance or key staff?
○ Yes ○ No
Please advise of the changes
ricuse duvise of the changes
Word count
Word count: Must be no more than 300 words.
OPERATING COSTS - REPEAT APPLICATION (FINANCIAL DETAILS AND BUDGET)

In this section tell us the total of your operating budget, and how much you are applying to TECT for

The budget you provide must include all income and expenditure (confirmed and anticipated) must cover a 12 month period.

Total budget		
\$		
Must be a dollar amount.		
Amount requested from TECT		
\$		
Must be a dollar amount.		
% of total *		
This number/amount is calculated.		
Upload budget * Attach a file:		
Include all confirmed and anticipated expenditure		
Equipment Purchase		
* indicates a required field		
EQUIPMENT PURCHASE - (PROJECT	DETAILS)	
EQUITMENT FUNCTIASE - (FNO)ECT	DETAILS)	
What will the grant be used for? *		
Word count: Must be no more than 300 words.		
How will this equipment improve your se	rvice? *	
Word count: Must be no more than 300 words.		
EQUIPMENT PURCHASE - (FINANCIA	L DETAILS AND Q	(UOTES)
In this section tell us the total of your Equipme to TECT for	ent Purchase, and how	much you are applying
Amount requested from TECT *		
\$		
Must be a dollar amount.		
Funda vaisad/act acids		
Funds raised/set aside		
\$		

Must be a dollar amount.	
Funds yet to raise	
\$	
Must be a dollar amount.	
Total Cost of Equipment *	
Must be a dellar arrayant	
Must be a dollar amount.	
% of total	
No greater than 50%	
How will you raise any remaining funding	g requried?
Word	
Word count: Must be no more than 300 words.	
Provide name of funders and application timeframe	es.
Please upload quotes * Attach a file:	
Have you sought alternative quotes? * Yes	○ No
Two quotes need to be provided for any items over	9
Project / Programme - One off	
* indicates a required field	
•	:10)
Project / Programme - (Project deta	IIS)
Name of project / programme *	
What will the awart be used for 2 *	
What will the grant be used for? *	
Word count:	
Must be no more than 300 words.	
Anticipated start date *	Anticipated end date *

Must be a date.	Must be a date.	
Describe the experience your organis	sation has to effectively deliver the proje	ect *
, j		
Word count:		
Must be no more than 300 words.		
What other community organisations	s do you work, partner, or collaborate wi	th? *
, ,		
Word count:		
Must be no more than 300 words.		
Mast be no more than 500 words.		
Are you aware of any similar services	s locally? *	
,,,,		
Ward acoust		
Word count: Must be no more than 300 words.		
Must be no more than 500 words.		
Project / Programme / Popofite	and impact)	
Project / Programme - (Benefits	and impact)	
When the theta maneta at the meaning manera and	- 42 14/1-4	3 4
Why is this project/programme need	ed? What supporting evidence is based o	on? *
Why is this project/programme need	ed? What supporting evidence is based o	on? *
Why is this project/programme need	ed? What supporting evidence is based o	on? *
Why is this project/programme need Word count:	ed? What supporting evidence is based o	on? *
	ed? What supporting evidence is based o	on? *
Word count:	ed? What supporting evidence is based o	on? *
Word count:		on? *
Word count: Must be no more than 300 words.		on? *
Word count: Must be no more than 300 words.		on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a		on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count:		on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a		on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words.	chieve? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count:	chieve? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words.	chieve? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words.	chieve? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit Must be a number.	chieve? * it from your project or service? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit	chieve? * it from your project or service? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit Must be a number.	chieve? * it from your project or service? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit Must be a number.	chieve? * it from your project or service? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit Must be a number. How do you determine how many pe	chieve? * it from your project or service? *	on? *
Word count: Must be no more than 300 words. What outcomes are you seeking to a Word count: Must be no more than 300 words. How many people will directly benefit Must be a number.	chieve? * it from your project or service? *	on? *

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Project / Programme - (Financial details and budget)

In this section, please tell us the total of your project/programme budget and how much you are applying to TECT for:

The budget you provide must include all income and expenditure (confirmed and anticipated) and must cover a 12-month period.

Total budget *	
\$	
Must be a dollar amount.	
Amount requested from TECT *	
\$	
Must be a dollar amount.	
Funds raised/set aside *	
\$	
Must be a dollar amount.	
Amount yet to raise *	
\$	
Must be a dollar amount.	
% of total *	
This number/amount is calculated. No greater than 50%	
No greater than 50%	
How will you raise any remaining fundin	g requried? *
Word count: Must be no more than 300 words.	
Provide name of funders and application timefram	es.
Upload budget *	
Attach a file:	
Please include all confirmed and anticipated incon	ne and expenditure.

Building Project - Upgrade or new building (Community Development Fund)

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Attach a file:

This is the incorrect form to apply for a building project. Please apply to our Community Facilites fund or contact our office on 07 578 094 (during business hours) or email info@tect.org.nz

Please visit our funding page for a description of each of our funds.

Supporting Documents and Feedback

SUPPORTING DOCUMENTS

Attach any other information, e.g. letters of support, general comments or other documents.

Also please note that depending on the type of project (i.e. capital projects, etc) we may also require some additional information such as resource/building consents, feasibility study, land ownership etc.

Attach a file:				
FEEDBACK				
The time required to prepare an ○ Strongly agree ○ Agree	-			
The application process is very a process in very a process is very a process in very a process is very a process in very a process in very a process is very a process in ve	_	Strongly disagree	○ N/A	
Please provide us with your suggestions about any improvements we could make to our application process				
Word count: Must be no more than 300 words.				

Declaration

- * indicates a required field
- 1. This application has the formal approval of our Board/Committee/Authority; and
- 2. I certify that the information provided in this application, is to the best of our knowledge, true and correct in every respect; and

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- 3. That further information provided by us during the course of assessment of this application will be true and correct; and
- 4. I acknowledge that any decision made by TECT is final. We accept that no reasons for such decisions will be given, nor will any correspondence be entered into; and
- 5. That if this application is successful, the funds awarded will be applied to the purpose as stated in this application and not applied to any other purpose without the express permission of the Trust having first been obtained; and
- 6. That documentary evidence in the form of invoices/receipts of the expenditure will be provided to TECT prior to the release of funds by TECT; and
- 7. Claims for staff salaries and wages may require the production of employment agreements and PAYE schedules; and
- 8. Funding will not be granted for projects where spending has already been incurred; and
- 9. That TECT may publish the name of our organisation, a description of our project, the amount of the funds awarded and any photographic images.
- 10. That TECT may disclose the applicants information to any third party it chooses for the purpose of verifying the accuracy of the information in the application, and evaluation and decision making concerning the application.
- 11. Privacy Act 1993: We acknowledge that the information supplied in this application may be made available to other parties in the course of enquiries regarding applications. Personal information collected will be held by the Trust for the purpose of assessing applications to TECT.

Authorised person's name *				
First Name	Last Name			
Must have financial authority				
Position in organisa	tion *			
- Osition in organisation				
EG: CEO / Chair of the board				
Authorised person's Email *				
Date of declaration				
Must be a date.				
riast be a date.				

Submitting your form

There is a 'Review and Submit' button at the bottom of the navigation box to the right of the screen.

You need to review your form before you can submit it – you won't be able to submit your form until all required questions (marked with an *) are completed.

Once reviewed you can submit your form by clicking on '**Submit**' at the top of the screen or on the navigation box.

Once submitted, you will receive an email from SmartyGrants acknowledging receipt of the form. If you do not receive this email please check you have clicked the submit button at the top of the form. No further editing of your form or uploading of support material is possible once submitted.

If you have any queries or experience any problems please phone us on **07 578 5094** during business hours or email info@tect.org.nz