

Community Grant Application Form

Form Preview

Eligibility and Guidelines

* indicates a required field

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. Before completing this application form, please read the following information.

GUIDELINES:

- [Community Grants Guidelines and Terms & Conditions](#)
- [Community Funding Policy 2023](#)
- [Tauranga City Council Community Outcomes](#)

If you have any questions, contact funding@tauranga.govt.nz.

ELIGIBILITY:

The Applicant

- Is able to demonstrate alignment between their project and the aims of this fund
- Fits at least one of the following categories:
 - New Zealand registered charity
 - Not for profit school, kura or Early Childhood Education
 - Organisation delivering Kaupapa Māori outcomes
- Will deliver the project in Tauranga City
- Is able to demonstrate financial viability
- Does not owe any reports or money to Tauranga City Council as a result of previous funding or grants
- Has the appropriate type and level of insurance for the activities that are the subject of this grant
- The project is not one of the activities listed in Schedule 2 of the Community Grants Guidelines

I confirm the organisation meets the eligibility criteria *

☐ Yes

☐ No

Organisation Details

* indicates a required field

Organisation Name *

Organisation Name

Please use your organisation's full name.

Organisation NZBN

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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

Must be formatted correctly.

NZ Charity Registration Number (CRN)

The Charity Registration Number provided will be used to look up the following information. 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

Must be formatted correctly.

School/ECE Service Number

Is your organisation a Kaupapa Māori organisation? *

☐ Yes ☐ No

For the purposes of the Tauranga City Council's Community Funding Policy, a Kaupapa Māori organisation is run by Māori and grounded in a Tauranga Moana Māori worldview and value base, but not necessarily affiliated with any particular iwi and/or hapū group in Tauranga. It may be a registered charity, but it could also just be a not-for-profit organisation.

Primary Bank Account *

Account Name

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Account Number

Must be a valid New Zealand bank account format.

Bank Deposit Slip *

Attach a file:

If you are a national organisation or based at a national office, is your local branch aware of this application and do they support it? *

☐ Yes

☐ No

☐ Not Applicable

About your organisation

What does your organisation do, who does it support, and what role does it play in the community? *

Who are your key partners or organisations you work with, and how do these relationships support your work? *

How does your organisation demonstrate Te Tiriti o Waitangi Partnership? *

Has your organisation received funding from Tauranga City Council in the last three years? *

☐ Yes

☐ No

Project Details

* indicates a required field

Project Title *

Provide a name for your project. Your title should be short but descriptive

Project Description and Location *

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Please provide a brief description of the project or programme.

Who will be involved? *

Please list the groups or people who will be involved in the project .

Who will benefit? Include an estimate of numbers *

Which age group will primarily benefit from this project? *

☐ 0-14 years ☐ 15-24 years ☐ 25-44 years ☐ 45-64 years ☐ 65 years and over

Attach any relevant files or background material

Attach a file:

Please describe any project risks and how you plan to reduce or eliminate these risks *

Start Date *

Must be a date.

If unknown, provide your best guess or leave blank

End Date *

Must be a date.

If unknown, provide your best guess or leave blank

Total Project Cost *

Must be a dollar amount.

Total Amount Requested (\$5,001 - \$50,000) *

Must be a dollar amount.

Upload a full project budget including details of other funding and whether or not it has been confirmed. The budget must balance (total income = total expenditure).

Upload a full project budget and latest annual accounts *

Attach a file:

Objective 1

* indicates a required field

Tauranga City Council Strategic Direction

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Your application must include three objectives. At least one of your objectives needs to align with [Tauranga City Council's strategic direction](#).

To enable you to do this, we have included objectives and measures from our strategies. Click on these links for more information.

[Tauranga Matarauui- Inclusive City Strategy](#)

[Tauranga Taurikura- Environment Strategy](#)

[Te pai me to whai rawa o Tauranga Moana ki te ao- Western Bay Economic Strategy](#)

Community Grants are funded from rates. To help Council demonstrate the value of this investment, funded projects need to show how they contribute to Council's community outcomes and strategic priorities. The information you provide will help us understand and report on the difference your project makes for our community.

If your application is successful, the objectives, measures and targets will form the basis of the letter of agreement. When your project is complete, you will be required to report on these.

Provide an objective for this project that aligns with a Tauranga City Council objective and select the corresponding measure

Objective 1 *

What changes do you expect will occur as a result of your project?

Tauranga City Council objective *

No more than 1 choice may be selected.

Measure 1 *

No more than 1 choice may be selected.
The measure must be able to be counted or tracked to show progress

Target 1 *

Must be a number.
Identify a target for this measure you have provided - an estimated total for your project.

Objective 2

* indicates a required field

Provide your own objective, measure and target for this project

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Objective 2 *

What changes do you expect will occur as a result of your project?

Measure 2 *

The measure must be able to be counted or tracked to show progress

Target 2 *

Must be a number.
Identify a target for this measure you have provided - an estimated total for your project.

Objective 3

* indicates a required field

Provide your own objective, measure and target for this project

Objective 3 *

What changes do you expect will occur as a result of your project?

Measure 3 *

The measure must be able to be counted or tracked to show progress

Target 3 *

Must be a number.
Identify a target for this measure you have provided - an estimated total for your project.

Declaration

* indicates a required field

Children's Act 2014

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You acknowledge and agree that, depending on the nature of Your Project, you may be considered to be a specified organisation pursuant to s24(1)(c)(ii) of the Children's Act 2014 ("CA"). You warrant that, in relation to the Project, You will comply with Your obligations under the CA (if any), including the obligation to undertake safety checks on persons employed or engaged as a children's worker. You shall provide TCC with information (upon request) demonstrating the processes You have in place to ensure compliance with the CA and Your compliance with those processes.

Please see the [Vulnerable Children's Act 2014](#) for more information.

If your application is successful and it involves working with children, we may request evidence of Police vetting of staff. *

- ☐ I agree to provide evidence in accordance with the Children's Act 2014
- ☐ I do not agree

Terms and Conditions

The Terms and Conditions for this fund are outlined in the document linked below and must be read before responding to the following question.

[Tauranga City Council Community Grants Terms Conditions](#)

I confirm that I have read and agree to the Terms and Conditions *

- ☐ Yes
- ☐ No

Please Note: If your funding application is incomplete, that is, if any of the required documents are missing without explanation, your application will be withdrawn from consideration and you will be notified accordingly.

Privacy Notice

We will respect and uphold your rights to privacy protection under the information privacy principles in the New Zealand Privacy Act 2020. To view our specific privacy statement that is applicable to your application and this online grant administration service, go to our [Tauranga City Council Smarty Grants privacy statement](#)

Privacy Statement

Tauranga City Council (Council) is collecting information from you as part of this application, some of this information may be personal information. This includes your name, contact details, role, organisation info, bank account details and may include application responses or supporting information (including reporting). Your information and any supporting documents may be used to assess and process this application, verify information you have provided, administer and manage this grant, contact or notify you about any matter relevant to the grant and/or application (including monitoring and compliance of the grant funding terms and conditions), and to update you from time to time about our grant programmes.

This application contains some fields that are mandatory, if you do not provide us with this information, we will be unable to process your application. We will not share your personal information with any other organisation or individual unless they are our contractor or other relevant 3rd party and disclosure is necessary for the specified purposes above. You

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have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you would like a copy of your information, or to have it corrected, please contact us at info@tauranga.govt.nz, or 07 577 7000. For further information about how Council will handle your personal information, please refer to [Tauranga City Council's Online Grant Privacy Statement](#).

I confirm I have read and understand the above Privacy Statement; and any personal information I include about any other person(s) in this application has been provided with their permission and can be used for the purposes identified above. *

☐ Yes

☐ No

Application Contact

This section must contain the contact details of the individual who is authorised to complete and submit this application on behalf of the organisation.

Contact Name *

Title

First Name

Last Name

Position *

Phone Number *

Must be a New Zealand phone number.

Primary Email Address *

Must be an email address.

Declaration

I have authority to apply on behalf of the organisation *

☐ Yes

☐ No

I certify that to the best of my knowledge the statements made within this application are true and correct *

☐ Yes

☐ No

Date of declaration *

Must be a date.