Creative Communities Scheme

* indicates a required field

Name and contact details

Applicant name *	IndividualOrganisationOrganisation Name				
	Title	First Name	Las	st Name	
Contact person (for a group or organisation)	Title	First Name	Las	st Name	
Street or physical address *	Address Must be a	New Zealand p	oostcode		
Postal Address (if different from above)	Address	n New Zealand			
Email *	Must be ar	n email address	5.	this email addres	SS.
Telephone (day) *	Must be ar	n New Zealand	phone nu	ımber	
Bank Account *	Account Name Account Number Must be a valid New Zealand bank account format. If you are successful your grant will be deposited into this account.				

GST number (if applicable)		
Ethnicity of applicant/group ☐ New Zealand European/Pāke ☐ Māori ☐ Pacific Peoples	hā □ Asian	Eastern/Latin American/Africar
You can select multiple options.		
Details		
Diagram since from the end date it also as to see		sife Pasalas Datail. Comana
Please give further detail about you	r ethnicity. Eg Ethnicity: Pa	icinc Peoples, Detail: Samoan.
Are you available to speak to committee members in supp O Yes		
	∃ Local paper	□ Radio
	Poster/flyer/brochure Social media	☐ Everything Kapiti☐ Creative NZ website
Project details		
* indicates a required field		
Project Title *		
Brief description of project *		
Provide a short description (100 wo	rds recommended) of your	project - what are you out to do?
Venue / location Address		
Start date *		
Must be a date and no earlier than 3	3/9/2024.	
Finish date *		

Must be a date and no later than 3/9/2025.		
Number of active participants *		
Must be a number.		
Number of viewers/audience members *		
Must be a number.		
Funding criteria		
See the <u>Creative Communities Scheme</u> at terms used in this section.	pplication guide for more detail on the	
Funding criteria: Which of the scheme's three funding criteria are you applying under? If your project meets more than one criterion, choose the one that is the project's main focus * 1. Access and participation: Create opportunities for local communities to engage with,		
 and participate in local arts activities 2. Diversity: Support the diverse artistic c 3. Young people: Enable young people (uparticipate in, the arts 		
Artform or cultural arts practice * Craft/object art Dance Inter-arts Literature Music	 □ Ngā toi Māori □ Pacific arts □ Multi-artform (including film) □ Theatre □ Visual arts 	
Which activity best describes your proje ☐ Creation only ☐ Creation and presentation ☐ Workshop/wānanga	rct? * ☐ Presentation only (exhibition) ☐ Presentation only (performance or concert)	
Project details (continued)		
* indicates a required field		
Project details		
1. The idea / Te kaupapa: What do you w	vant 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 paear criterion: access and partic		roject will deliver to your selected r young people. *
Project details (budge	et)	
* indicates a required field	,	
5. The budget / Ngā pūtea		
See the <u>Creative Communitorial</u> to complete this section.	ties Scheme applica	tion guide for more detail on how
Are you GST registered? * O Yes - Do NOT include GST O No - Include GST in your b		
Project costs		
Write down all the costs of yo promotion, equipment hire, a		the details, eg materials, venue hire, el costs.
Item example hall hire	Detail example 3 da at \$100 per day	ays' hire Amount example \$300
		\$
		\$
		\$
		\$
		\$ \$
	1	P \$
	1	\$ \$
		L'

\$			
This number/amount is calculated			
Project income			
-			
Write down all the income you	will get for your project from ti	icket sales, sale of artwork,	
	own funds, other fundraising. D	o not include the amount you	
will be requesting from Creativ	e Communities Scheme.		
Income example ticket	Detail example 250 tickets	Amount example \$3,750	
sales	at \$15 per ticket		
		Must be a dollar amount.	
	<u></u>	\$	
		\$	
		\$	
		\$	
		\$ \$	
		Þ	
Decidence accompany			
Budget summary			
Total income			
\$			
This number/amount is calculated			
	he maximum amount you ca	in request from the	
Creative Communities Scheme)			
\$			
This number/amount is calculated.			
Amount you are requesting from the Creative Communities Scheme *			
Must be a dollar amount.			
This amount should be less than the "Cost less income" figure.			

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 Creative Communities Scheme and Creative New Zealand's other funding programmes).

Date applied	Who to	How much	Confirmed
Must be a date.		Must be a dollar am	nount.
		\$	
		\$	
		\$	
		\$	

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.

Project detail (budget)

Tell us about other grants you have received through the Creative Communities Scheme in the past three years.

Date applied	Project title	Amount received	Project completion report submitted
Must be a date.		Must be a dollar amour	t.
		\$	
		\$	
		\$	
		\$	
		\$	

Financial Statement and Quotes

Financial statement and quotes: Attach a file:		
Sustainability		
Kāpiti Coast District Council is committed development, including protecting the expedience its carbon footprint as part of the your event sustainable?	nvironment, and see	eks to manage and
Supporting information		
If you have any additional material you below. This is not a requirement. Attach a file:	would like us to refe	r to, please enter it

Checklist / Declaration	
* indicates a required field	
Checklist	
Before submitting your application, complete this checklist * ☐ My project has an arts focus ☐ My project takes place in the local authority district of Kāpiti Coast ☐ I have provided quotes and other financial details as needed	t District Council
Declaration	
You must read and agree to the following before submitting your appleach box to show that you have read the information and agree to ea	
You must agree to the below statement: * □ I/We understand that if this application is successful I/we cannot resame project from Creative New Zealand's other funding programmes □ I/We declare that the details contained in this application are correlative to commit to the following conditions.	5.
If this application is successful, I/we agree to: * □ complete the project as outlined in this application (or request per 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 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 conduction contact the Creative Communities Scheme administrator to let the event or presentation that is funded by the scheme □ acknowledge Creative Communities Scheme funding at event operation.	ne grant approval ducted by Kāpiti Coa em know of any pub
performances use the Creative Communities Scheme logo in all publicity (eg possible newsletters) for the project and follow the guidelines for use of the logical be downloaded from the Creative New Zealand website: http://www.about-creative-new-zealand/logos I understand that the Kāpiti Coast District Council is bound by the Official Information and Meetings Act 1987 I/we consent to Kāpiti Coast District Council recording the personal provided in this application, retaining and using these details, and dis Creative New Zealand for the purpose of evaluating the Creative Community I/we understand that my/our name and brief details about the project of the media or appear in publicity material.	ster, flyers, e- go. Logo and guideli vw.creativenz.govt.r Local Government al contact details closing them to amunities Scheme.

these deta		nd that I/we have	ne consent of all people involved to provide the right to have access to this information. Privacy Act 1993
Authoris	sation		
NB: All apples		on/s under the ag	e of 18 must be signed by applicant's parent o
V	.		
Your nam		Last Mana	
Title	First Name	Last Name	
Name of	parent / guardia	n for applicants	s under 18 years of age
Title	First Name	Last Name	
Date			
Must be a c	late.		
Must be a c	late.		