| Proposal for museum development funding  |                          |
|--|--------------------------|
| * indicates a required field   |                          |
| Details  |                          |
| Project name: *  |                          |
|  |                          |
| Applicant name: *  |                          |
|  |                          |
| Applicant email *  |                          |
|  |                          |
| Applicant phone number *   |                          |
|  |                          |
| Are you applying on behalf of an organisation? *  O Yes  O No  |                          |
| Contact person's details   |                          |
| Name of contact person for organisation  |                          |
|  |                          |
| Contact person's position at organisation  |                          |
|  |                          |
| Phone number   |                          |
|  |                          |
| Email  |                          |
|  |                          |
| Further details  |                          |
| Are you on our system as a supplier? *   |                          |
| <ul><li>Yes</li><li>No</li></ul>   |                          |
| You will be on our system if you have received funding from Council before, of for us as a contractor. | or if you have done work |

| Please let                           | t us know if you                    | are on our syst   | tem under a differen                             | t name.               |
|--------------------------------------|-------------------------------------|-------------------|--|-----------------------|
|                                      | discussed this<br>nnager, Creativit |                   |  | Heritage Advisor and/ |
| Please g                             | jet in touch                        |                   |  |                       |
| Arts, Muse                           |                                     | dvisor or the Man | continuing your appl<br>nager, Creativity and Cu |                       |
| Applicant  ○ Individua  Organisation | al Org                              | ganisation        |  |                       |
| Title I                              | First Name                          | Last Name         |  |                       |

#### Overall objectives and outcomes

\* indicates a required field

#### Overall objectives and outcomes

Outline what you hope to achieve by this activity or project and tell how the project can contribute to Kāpiti Coast District Council's high level strategic aims of:

- enhancing cultural wellbeing in the community through language, stories, visual and performing arts, ceremonies and heritage that make up our communities.
- facilitating social connection and inclusion, giving people a means of expression, a sense of community and a sense of belonging and identity, through arts culture and heritage.

And strategic aims for heritage in the Kāpiti Coast District:

- promoting Kāpiti's pre- and post-settlement history to the community and wider New Zealand
- preserving and displaying narratives of our communities' heritage, both past and for the future.

Objective(s) \*

| Word count:  |                          |                           |
|--|--------------------------|---------------------------|
| Must be no more than 100 words.                          |                          |                           |
| Desired outcome(s) *                                     |                          |                           |
|  |                          |                           |
|  |                          |                           |
| Word count:  |                          |                           |
| Must be no more than 300 words.                          |                          |                           |
| What you are requesting f                                | undina for?              |                           |
|  |                          |                           |
| Amount requested *                                       |                          |                           |
| Must be a dollar amount.                                 |                          |                           |
| Which financial year(s) are ye                           | . annlying for? *        |                           |
| Which financial year(s) are yo  ☐ 2023/24 financial year | applying for?            |                           |
| ☐ 2024/25 financial year                                 |                          |                           |
| □ 2026/27 financial year                                 |                          |                           |
| NOTE: Applications for the 2023/2                        | 4 financial year must be | e submitted by 24 May 202 |
| What will that funding cover?                            | k                        |                           |
|  |                          |                           |
|  |                          |                           |
|  |                          |                           |
| Word count:<br>Must be no more than 350 words.           |                          |                           |
| Trade de no more dian 330 words.                         |                          |                           |
| About your project                                       |                          |                           |
| About your project                                       |                          |                           |
| * indicates a required field                             |                          |                           |
| Dates and location                                       |                          |                           |
| Start date *   |                          |                           |
|  |                          |                           |
| Must be a date.  |                          |                           |
| End date *   |                          |                           |
|  |                          |                           |

| Must be a date.  |
|--|
| Location/s: (e.g. whole of Kāpiti Coast District, specific site or individual town/village). *               |
|  |
| If your location is outside of town/ village centres, please enter its GPS coordinates                       |
|  |
| Project details  |
| The idea/Te kaupapa: What do you want to do? *   |
|  |
| The process/Te whakatutuki: How will the project happen? *   |
| The people/ Ngā tāngata  |
| * indicates a required field   |
| Organisation   |
| What is the main purpose of your organisation? *   |
|  |
| Who is usually involved in activities (e.g. volunteers, paid staff, age groups, where you are based)? $\ast$ |
|  |
| Tell us about the cultural Identity of the people in your organisation (include ethnicity if you want to). * |
|  |

| What areas of the community will benefit from this project? Is there a particular community group you are targeting? *   |
|--|
|  |
| Individual   |
| Tell us about your background and interest in heritage. *  |
|  |
| Tell us about your cultural identity (include ethnicity if you want to). *   |
|  |
| What areas of the community will benefit from this project? Is there a particular community group you are targeting? *   |
|  |
|  |
| Budget   |
| Project costs  |
| Write down <b>all</b> the costs of your project and include the details, eg. contractor fee, promotion costs, staffing to carry out collection management etc. |

| Item   | Detail   | \$ |
|--|--|----|
| eg. promotional design/printing,<br>fees/vouchers for volunteers,<br>advertising etc | eg. graphic designer fee, voucher<br>for student help on weekend |    |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |

#### Project income

Write down all the income you will get for your project from: your own funds, other grants, donations, other fundraising.

| Item | Detail | \$ |
|------|--------|----|
|      |        | \$ |

| \$ |
|----|
| \$ |
| \$ |
| \$ |
| \$ |
| \$ |
| \$ |

#### **Budget Totals**

This section will automatically calculate based on your answers above.

| Total Income Amount               | Total Expenditure Amount          | Income - Expenditure                         |
|-----------------------------------|-----------------------------------|--|
| \$                                | \$                                | \$   |
| This number/amount is calculated. | This number/amount is calculated. | This number/amount is calculated.            |
|                                   |                                   |  |
|                                   |                                   | Amount requested from Kāpiti Coas<br>Council |
|                                   |                                   |  |

#### Other financial information

Tell us about any other funding you have applied for or received for this project.

| Date applied    | Who to | How much | Confirmed or<br>unconfirmed |
|-----------------|--------|----------|-----------------------------|
| Must be a date. |        |          |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |
|                 |        | \$       |                             |

Additional Information - financial

| Attach quotes, alternative budgets, oth | er financial information here. |
|---|--------------------------------|
| Attach a file:                          |                                |
|   |                                |
|   |                                |

Attach images, other supporting information

| Attach images or other supporting information Attach a file:  |
|---|
|   |
|   |
| Terms and conditions  |
| * indicates a required field  |
| Accountability:   |
| <ul> <li>Use the funding for the purpose you've received it.</li> <li>Keep a record of what you spend on this project.</li> <li>Keep a track of the results of your initiative, and let us know how it's going (in an email, meeting, through your organisation's regular reporting, or in a separate report). Talk to us:</li> </ul> |
| <ul> <li>if you have to defer or cancel the project</li> <li>if you find any issues in completing the project</li> <li>if you want to change the project from what you originally planned.</li> <li>Submit a completion report at the end of the project or at the end of the financial year you received funding for.</li> </ul>     |
| Acknowledgement of Council:   |
| <ul> <li>Acknowledge Kāpiti Coast District Council in all your formal documents and<br/>promotional material relating to this project or initiative.</li> </ul>   |
| By filling out the below, you confirm that you have read and agree to all the terms and conditions.   |
| Name *  |
|   |
| Position *  |
|   |
| Date *  |
| Must be a date.   |