

|  |
| --- |
| Creative Communities Scheme |
| **Application Form** |
| **Funding for local arts projects****Ngā pūtea mō ngā toi te hautāinga** |

|  |  |
| --- | --- |
| **Closing Date** |  6 September 2024 |
| **For Projects that take place between** |  1 November 2024 – 1 November 2025 |
| **To submit your Creative Communities Scheme application please return this form to:** | Governance Services Phone: (07) 868-0200governance.services@tcdc.govt.nz |

|  |
| --- |
| **Read the *Creative Communities Scheme Application Guide***Before you prepare your application, you should read the *Creative Communities Scheme Application Guide*. This guide tells you:* whether you are able to apply for Creative Communities Scheme funding for your project
* which projects and costs are eligible and ineligible
* what information you will need to include in your application
 |
|  |
| **Complete the *Creative Communities Scheme Application Form**** Applications can only be submitted using this document (*Creative Communities Scheme Application Form* or an online version of this document)
* To complete this application form in Microsoft Word (version 2003 or newer) you need to type your answers to each question in the boxes provided.
 |
| Example: | Type your answer here |
| * **IMPORTANT – DO NOT edit any text outside of these boxes**
* **If you are unable to type into the boxes provided please print a copy and complete by hand**
* If you need more space, attach information to the back of this application form. Please include the section headings to help assessors.
* We recommend that you limit supporting photographs of evidence of the success of previous events to two photographs to allow the assessment panel to readily view each application online.
* We recommend that you keep a copy of your completed application for your own reference.
* Contact the CCS administrator if you need advice on your application (see contact details on the cover page).

**Privacy Notification**Any information other than personal information you provide will be official information.  By submitting this application, you agree to the application information being made publicly available if requested. The information provided will be used for the purpose of assessing the application and under the Privacy Act 2020 you have the right to request access and correction of the information.  You understand that the Council must act in accordance with the requirements of the Local Government Official Information Meetings Act 1987 and the Privacy Act 2020. If anyone was to request your application information, your personal contact details will be redacted. ***It is important that you let us know if your application includes trade secrets, commercially sensitive materials or any other information you consider should not be publicly disclosed.  This information will be assessed and redacted as required.*** |

|  |
| --- |
| **Before submitting your application, complete this checklist:** *(mark with a ✓ or a Y)* |
|  | My project has an arts focus |
|  | My project takes place in the local authority district that I am applying to |
|  | I have answered all of the questions in this form |
|  | I have provided quotes and other financial details for large items |
|  | I have provided Financial Statements for my Group or Organisation  |
|  | I have provided proof of bank account (deposit slip, bank statement etc) |
|  | I have provided other supporting documentation |
|  | I have read and signed the declaration |
|  | I have made a copy of this application for my records. |

|  |
| --- |
| **Name and contact details** |
| Are you applying as an individual or group?  | Individual |  | Group |  |
| Full name of applicant: |  |
| Contact person (for a group): |  |
| Street address/PO Box: |  |
| Suburb: |  | Town/City: |  |
| Postcode: |  | Country: | New Zealand |
| Email: |  |
| All correspondence will be sent to the above email or postal address |
| Telephone (day): |  |
| **Please be available on 27 September 2024 to answer any questions via phone in support of your application from the CCS Assessment Committee.** |
| Name on bank account: |  | GST number: |  |
| Bank account number: |  |
| PLEASE ATTACH PROOF OF BANK ACCOUNT to this application - If you are successful, your grant will be deposited into this account. |
| **Ethnicity of applicant/group** *(mark with an ✓ or Y, you can select multiple options)* |
| New Zealand European/Pākehā: |  | Detail: |  |
| Māori: |  | Detail: |  |
| Pacific Peoples: |  | Detail: |  |
| Asian: |  | Detail: |  |
| Middle Eastern/Latin American/African: |  | Detail |  |
| Other: |  | Detail: |  |
| **Will your activity/project continue if you receive partial or no funding?**  |
| Yes: |  | No: |  |
| **How did you hear about the Creative Communities Scheme?** *(select* ***ONE*** *and mark with an ✓ or Y)* |
|  | Council website |  | Creative NZ website |  | Social media / Radio |
|  | Council mail-out |  | Local paper |  | Creative Coromandel |
|  | Council staff member |  | Poster/flyer/brochure |  | Word of mouth |
|  | Other (please provide detail) |  |

|  |  |
| --- | --- |
| **Project name:** |  |
| Brief description of project:  |
|  |
| **Project location, timing and numbers** |
| Venue and suburb or town: |  |
| Start date: |  | Finish date: |  |
| Number of *active* participants: |  |
| Number of viewers/audience members: |  |
| **Funding criteria:** *(select* ***ONE*** *and mark with a ✓ or Y)*Which of the schemes 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.  |
|  | **Access and participation:** *Create opportunities for local communities to engage with, and participate in local arts activities* |
|  |
|  | **Diversity:** *Support the diverse artistic cultural traditions of local communities* |
|  | **Young people:** *Enable young people (under 18 years of age) to engage with, and participate in the arts* |
|  |
| **Artform or cultural arts practice:** *(select* ***ONE*** *and mark with a ✓ or Y.)* |
|  | Craft/object art |  | Dance |  | Inter-arts |
|  | Literature |  | Music |  | Ngā toi Māori |
|  | Pacific arts |  | Multi-artform (including film) |  | Theatre |
|  | Visual arts |
| **Activity best describes your project?** *(select* ***ONE*** *and mark with a ✓ or Y)* |
|  | Creation only |  | Presentation only (performance or concert) |
|  | Creation and presentation |  | Presentation only (exhibition) |
|  | Workshop/wānanga  |

|  |
| --- |
| **Project details**The boxes below will expand as you type. If you are completing this application by hand you may need to expand these boxes *before* you print this form and/or add additional sheets. If you do, please clearly label these additional sheets using the headings below. |
| 1. **The idea/Te kaupapa:** What do you want to do?
 |
|  |  |
| 1. **The process/Te whakatutuki:** How will the project happen?
 |
|  |  |

|  |
| --- |
| 1. **The people/Ngā tāngata:** Tell us about the key people and/or the groups involved.
 |
|  |  |
| 1. **The criteria/ Ngā paearu:** Tell us how this project will deliver to your selected criterion: access and participation, diversity or young people.
 |
|  |  |

|  |
| --- |
| 1. **The budget/Ngā pūtea**
 |
|  See the CCS Application Guide for more detail on how to complete this section. |
|  Are you GST registered? | Yes |  | Do NOT include GST in your budget |
|  | No |  | Include GST in your budget |
| **Project costs** | Write down all the costs of your project and include the details, eg materials, venue hire, promotion, equipment hire, kai, artist fees and personnel costs. |
| **Item** *eg hall hire* | **Detail** *eg 3 days’ hire at $100 per day* | **Amount** *eg $300* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Costs** |  | **$** |
| Project Income | Write down all the income you will get for your project from ticket sales, sale of artwork, other grants, donations, your own funds, other fundraising. Do not include the amount you will be requesting from CCS. |
| **Income** *eg ticket sales* | **Detail** *eg 250 tickets at $15 per ticket* | **Amount** *eg $3,750* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total Income** |  | **$** |
| **Costs less income** | ***This is the maximum amount you can request from CCS*** | **$** |
| **Amount you are requesting from the Creative Communities Scheme** | **$** |

**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 CCS and Creative New Zealand’s other funding programmes). |
| Date applied | Who to | How much | Confirmed/unconfirmed |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Tell us about other grants you have received through the Creative Communities Scheme in the past three years. |
| Date  | Project title | Amount received | Project completion report submitted (yes/no) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **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 that are not being used for this project you should include your reserves statement or policy.Please note Kai and refreshments are included in the fundable items for the Creative Communities Scheme. |

|  |
| --- |
| **You must read and sign the following. Please place a** *✓* **or a Y in each box to show that you have read the information and agree to each section.** |
|  | I/We understand that if this application is successful I/we cannot receive funds for the same project from Creative New Zealand’s other funding programmes. |
|  |
|  | I/We declare that the details contained in this application are correct and that I/we have authority to commit to the following conditions. |
|  |
| **If this application is successful, I/we agree to:** |
|  | complete the project as outlined in this application (or request permission in writing from 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 grant approval 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 conducted by the local council  |
|  | contact the CCS administrator to let them know of any public event or presentation that is funded by the scheme |
|  |
|  | acknowledge CCS funding at event openings, presentations or performances |
|  | use the CCS logo in all publicity (eg posters, flyers, e-newsletters) for the project and follow the guidelines for the use of the logo. The logo and guidelines can be downloaded from the Creative New Zealand website: <http://www.creativenz.govt.nz/about-creative-new-zealand/logos>  |
|  |
|  | I understand that the Thames-Coromandel District Council is bound by the Local Government Official Information and Meetings Act 1987 |
|  |
|  | I/we consent to Thames-Coromandel District Council recording the personal contact details provided in this application, retaining and using these details, and disclosing them to Creative New Zealand for the purpose of evaluating the Creative Communities Scheme. |
|  |
|  | I/we understand that my/our name and brief details about the project may be released to the media or appear in publicity material. |
|  |
|  | I/we undertake that I/we have obtained the consent of all people involved to provide these details. I/we understand that I/we have the right to have access to this information.This consent is given in accordance with the Privacy Act 1993NB: All applications by person/s under the age of 18 must be signed by the applicant’s parent or legal guardian. |
|  |
| Name |  |
|  | (Print name of contact person/applicant) |
| Signed: |  |
|  | (Applicant or arts organisation’s contact person) |
| Date: |  |