

Community Voluntary Organisation Support - Category 1 Application

Form Preview

Criteria and Overview

Community Voluntary Organisation Support (CVOS) Category 1 is a funding pool of \$10,000 for community groups seeking grants for new community initiatives/projects,

OR for community groups who have not received funding from CVOS before.

Criteria:

1. Community groups must be based in Central Hawke's Bay and be a voluntary non-profit organisation serving wholly or mainly residents of Central Hawke's Bay.
2. The application must demonstrate that the project is in response to a significant need in the community.
3. The group should receive a wide measure of support from their community. Please supply letter/s of support from Individuals/Groups who will benefit from your project.
4. The level of funding available from other agencies, including fundraising, will be taken into account when assessing the project, as will the contribution being made by the applicant.
5. The project should wholly or mainly benefit residents of Central Hawke's Bay.
6. Projects that are eligible for or have received funding from other agencies may be considered for funding from CVOS. However, priority will be given to projects which are unable to source funding from elsewhere.
7. Applicants that have received funding from CVOS previously for the same project are not eligible for funding.
8. Grants made for Category 1 projects will not exceed 75% of the total cost of the individual project.
9. Projects will be prioritised and the level of funding granted will be based on this.
10. The Assessment Committee is allowed the flexibility to allocate excess funds from Category 1 to Category 2 in those years when there are insufficient worthy applicants to receive grants from Category 1.
11. There must be evidence of the long term sustainability of the project.
12. All applicants must provide a report on the project to Council by 31 March in the year following the grant. Failure to do this could negatively affect future council funding requests from the organisation.

Applicant Details

* indicates a required field

Are you:

1. A Community Organisation domiciled in Central Hawke's Bay? *

☐ Yes ☐ No

Domiciled means having a registered base in Central Hawke's Bay

2. A Voluntary non-for profit organisation? *

☐ Yes ☐ No

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3. An organisation who wholly or mainly serves the residents of Central Hawke's Bay?

☐ Yes ☐ No

If you ticked Yes to all of the above please continue with your application.

General Details

4. Name of Organisation: *

Organisation Name

5. Organisation Address:

Address

6. Organisation Phone Number

Must be a New Zealand phone number.

7. Organisation Email

Must be an email address.

8. Primary Contact Person

First Name

Last Name

9. Primary Contact Position

10. Primary Contact Mobile Phone Number

Must be a New Zealand phone number.

11. Primary Contact Email

Must be an email address.

Organisation Details

12. Is your Organisation a legally constituted Society or Trust?

☐ Yes ☐ No

13. Give a brief summary of what your organisation does

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14. How many Volunteers does your organisation have?

Must be a number.

15. How many Voluntary Hours on average per week will be worked within your Organisation?

Must be a number.

16. How many paid employees does your organisation have?

Must be a number.

17. Number of paid hours per week

Must be a number.

18. How many individuals within the Community will benefit from your new community initiative/project?

Must be a number.

Type of application to CVOS

* indicates a required field

Are you:

19. Applying to the COVS for a new community project or initiative? *

☐ Yes

☐ No

20. OR a new applicant applying to the CVOS fund for running costs for the first time? *

☐ Yes

☐ No

New Community Initiative or Project

Details of your Community Initiative/Project

21. Project Title

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22. Project Description

Provide a short description (100 words recommended) of your project

23. Start Date - if applicable

Must be a date.

24. End Date - if applicable

Must be a date.

25. Tell us why this Project should be Funded. What benefit will it provide to the community and provide details of the long term sustainability of the project. If this application is for a new project, you need to give us information to show that there is a significant need in the community.

26. What are the expected outcomes of the project?

Describe three things you want the project to achieve in terms of benefits for participants and/or others (200 words recommended)

27. Please indicate the costs of this project (expenses)

Please note that we can fund up to 75% of the total cost of the project

**Expenses: List all the costs for this proje Please list dollar amount
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	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

28. Total Project Cost

\$

This number/amount is calculated.

What is the total budgeted cost (dollars) of your project?

29. Please indicate how your group will contribute financially to the project (income)

Income: How will your group contribute financially to the project? Please list dollar amount

Eg: Sponsorship/Fundraising, User Fees, Grants, Funds Spent, Funds Earmarked etc. Do not include CVOS funding you are applying for .	
	\$
	\$
	\$
	\$
	\$

30. Total Project Income

This number/amount is calculated.

31. Total Amount Requested

\$

This number/amount is calculated.

What is the total financial support you are requesting in this application?

New Applicant Financial Details

21. Budget: Running costs (expenditure)

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Expenditure: Please list the running costs of your organisation

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

22. Total Expenditure Amount

\$

This number/amount is calculated.

23. Budget: Income

Income: Please list the income your organisation receives

	\$
	\$
	\$

24. Total Income Amount

\$

This number/amount is calculated.

25. Total Amount Requested

\$

This number/amount is calculated.

Please note, grants cannot exceed 75% of the total running costs.

26. Please upload your latest financial statements

Attach a file:

27. Please upload confirmation of your bank account details

Attach a file:

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Further Information

* indicates a required field

28. Are you applying for other funding assistance for this project or your organisation? *

☐ Yes

☐ No

If Yes please list below

29. What other funding have you applied for?

Funder	Funding Applied For
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

30. Total Amount of Funding Applied For

\$

This number/amount is calculated.

31. Funding Received over the last 2 years

Funding Organisation	Funding Received
Eg: CVOS, Lotteries, COGS, Community Trust Organisations etc	
	\$
	\$
	\$
	\$
	\$
	\$
	\$

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32. Total Amount of Funding Received

\$

This number/amount is calculated.

Declaration

* indicates a required field

I hereby declare that the information supplied on behalf of my organisation is correct and that I will forward a report on the success of the project to Central Hawke's Bay District Council.

I consent to Central Hawke's Bay District Council keeping and using the personal contact details provided in this form for the purpose of the Community Voluntary Organisation Support (CVOS) Funding Scheme.

This consent is given in accordance with the Privacy Act 1993.

33. Declaration *

☐ I agree with the above declaration

34. Name

Title First Name Last Name

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By completing

35. Position
