Community Voluntary Organisation Support - Category 2 Application

Form Preview

Criteria

Community Voluntary Organisation Support (CVOS) Category 2 is a pool of $20,000 for ongoing support to existing community groups who provide community services in Central Hawke's Bay.

Criteria: Funding will be provided for costs that enable the continual running of a viable service that is deemed to be of considerable benefit to the community of Central Hawke's Bay. The onus of proof regarding benefit lies with the applicant.Costs may include:

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    - Rental of building
    - Power charges
    - Stationery
    - Photocopying
    - Postage
    - Telephone/Fax
    - Insurance
    - Financial reporting costs
    - Personnel costs essential to the provision of the service
    - Marketing

Costs which are not eligible include the following:Rates payments

-
    - Facility development, and other costs considered not being essential to the continual running of the service.

1. Community groups must be domiciled in Central Hawke's Bay and be a voluntary non-profit organization serving wholly or mainly the residents of Central Hawke's Bay.
2. 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.
3. The level of funding available from other agencies, including fundraising, will be taken into account when assessing the project.
4. Grants made for Category 2 will not exceed 50% of total ongoing organizational costs. However, if an organization is able to provide evidence that it is experiencing extreme hardship and the continuation of the viable service is at risk, a grant higher than 50% may be awarded.

Applicants must provide as part of their application:

- A copy of the most recent years set of financial accounts.
- Statistics or factual information which demonstrates the level of activity or achievements for the past year.
- Evidence of the support the group received from the community.

All applicants must provide a report on the project by 31 March in the year following the grant. Failure to do this could negate future funding requests from the organisation.

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Applicant Details

* indicates a required field

Are you:

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

○ Yes ○ No

Domiciled means your organisation has it's registered base in Central Hawke's Bay

2. A Voluntary non-for profit organisation? *

○ Yes ○ No

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

Please provide details of activities of your organisation including details of the services provided in the last 12 months

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 organisation?

Must be a number.

Why should your organisation be funded

19. Tell us why your organisation should be funded, and what public service benefit it will be to the community

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

20. Please indicate the running costs for your organisation (your expenses)

Expenditure: Please list the running cost $ s for your organisation

Eg. Power, Rent, Administration Costs etc	
	$
	$
	$
	$
	$
	$
	$
	$

21. Total Expenditure

$

This number/amount is calculated.

22. Please indicate how you intend to cover the running costs for your organisation (your income)

Income: Please list the income your orga $ nisation receives to contribute financiall y to the running costs

Eg: Sponsorship/Fundraising, User Fees, Grants, Funds Spent, Funds Earmarked etc	
	$
	$
	$
	$
	$
	$

	$
	$

23. Total Income

$

This number/amount is calculated.
What is the total budgeted cost (dollars) of your organisation?

24. Total Amount Requested

$

This number/amount is calculated.
What is the total financial support you are requesting in this application?

25. Please upload your latest financial statements
Attach a file:

26. Please upload confirmation of your bank account details
Attach a file:

This could include a deposit slip, a recent bank statement, a screenshot of your online banking account details, or another bank-issued document. The document must clearly show the account holder's name (matching the applicant) and the bank account number where the funding will be paid. You may redact transaction details and account balances.

Further Information

* indicates a required field

27. Are you applying for any other funding to assist with your organisations running costs? *

○ Yes
○ No

If Yes please list below

28. What other funding have your applied for?

Funder	Funding Applied For
	$
	$
	$
	$
	$

	$
	$
	$

29. Total Amount of Funding Applied For

$

This number/amount is calculated.

30. What funding have you received over the last 2 years?

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

31. 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.

32. Declaration *

○ I agree with the above declaration

33. Name *

Title	First Name	Last Name

By completing

34. Position *