FUNDING REQUEST FORM
**Neighbourhood Matching Fund (NMF)**

The purpose of this fund is to bring people together to build strong communities, by providing resources for self-help projects which link to RLC’s community outcomes. We particularly welcome projects that contribute to community safety and resilience.

Projects **must demonstrate** the capacity to build a stronger and healthier community/neighbourhood. **Please refer to NMF Guidelines.**

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| **BEFORE COMPLETING THIS FORM:** Please contact RLC, Business Support Advisor, **Mihi Morgan,** to discuss your project and assist with your application. Phone: (07) 348 4199 or email: communityfunding@rotorualc.nz |

**Assessment Criteria Checklist** (Please tick **√** )

* Our group and our project are within the Rotorua District
* Our project contributes to community safety and resilience
* Our project provides local public benefit and is free and open to all members of the public
* Our project demonstrates capacity to build a stronger and healthier community/neighbourhood
* We are not claiming for any expenditure already incurred by our group
* We are not applying for the purchase of land, maintenance or day-to-day operating expenses of our group

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| **IMPORTANT:**Please do not alter the format of this application form. If you complete this form using a computer, make sure the questions and the responses are exactly as in the original. |
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| **1. YOUR GROUP** |
| **Name of Group:**  |
| **Postal Address:**  |
| **Phone:**  | **Email:**  |
| **Address where the project will be undertaken:**  |
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| **1st Contact** |
| **Contact:**  |
| **Address:**  |
| **Phone:**  | **Email:**  |
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| **2nd Contact** |
| **Contact:**  | **Role:**  |
| **Address:**  |
| **Phone:**  | **Email:**  |

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| **Purpose** |
| Tell us about your Group. What is its purpose? Who are your members?  |
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| **2. LEGAL STATUS** (Please tick √ ) |
| Does your Group have legal status? ⬜ Yes ⬜ No |
| If **Yes,** please specify: ⬜ Trust ⬜ Incorporated Society ⬜ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**OR:** Name of organisation that will be umbrella, or act as fiscal sponsor: Rotorua Community Youth Centre Trust**GST Registration:** ⬜ Yes ⬜ No **GST Registration No:**  |

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| **3. YOUR PROJECT** [include additional sheets of paper if required] |
| **Name of Project:**  |
| **Start Date:** | **End Date:**  |
| Tell us about your project and how will it benefit the broader community and neighbourhood. How many people will benefit? How will you know the project has been a success?**Project Plan**What steps are involved in your project? Who is involved in each step of the project? What will they be doing?[include additional sheets of paper if required]Project should involve as many diverse groups and individuals as possible, to reflect your community.

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| **Activity** | **Who is involved?** | **Completion date** |
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| **4. COMMUNITY CONTRIBUTION** |  |
| **Volunteer Labour:** |
| **No of volunteers** | **No of hours each** | **(No of volunteers x No of hours x $15 p/hr)** |
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|  |  |  |
| **TOTAL:** | (A) |

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| **Professional Services** (specify type): |
| **Total no of hours** | **(No of hours x $65 p/hr)** |
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| **TOTAL:** | (B) |

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| **Donated Materials/ Supplies:** |
| **Description** | **Donated By** | **Value** (retail/hire price) |
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| **TOTAL:** | (C) |

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| **Any other resources towards project:** |
| **Description** | **Donated By** | **Value** (retail price) |
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| **TOTAL:** | (D) |

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| **Cash:** |
| **Donated/Sponsored By** | **Amount** |
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| **TOTAL:** | (E) |

**TOTAL COMMUNITY CONTRIBUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
 (A + B + C + D)

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| **5. FUNDING REQUIRED** |
| What do you require the funding for? [Please provide quotes or letters from supplier detailing costs] NB. We DO NOT pay for labour other than professional services, as ‘volunteer labour’ is the main part of your community contribution.

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| **Description** | **Amount** | **Quote provided** (Y/N) |
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**TOTAL FUNDING REQUIRED:** $(Needs to be less than or equal to community contribution) |

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| **6. DECLARATION**  |
| **We hereby declare that the information supplied here on behalf of our group is correct. If the application is successful, our group agrees to:**1. Complete the Acceptance Grant Letter or Contract Agreement and return it in the stamped addressed envelope (which will be enclosed with the letter notifying you of the amount granted by the assessment committee).
2. Only spend the funding granted on the items it is granted for.
3. Complete the form telling the story of how our project went, the outcomes of the work and what we spent the money on. This will be done within the timeframe set in the Acceptance Letter or Contract Agreement.
4. Participate in any funding audit of our group conducted by the Rotorua Lakes Council.
5. Acknowledge Rotorua Lakes Council’s contribution towards the activity / service in all promotional material.
6. Consider participating in a workshop to present information on the NMF grants and their project.

We consent to the **ROTORUA LAKES COUNCIL** collecting the details provided above, and retaining and using these details for the purpose of review of the ***Neighbourhood Matching Fund*.** We acknowledge our right to have access to this information. This consent is given in accordance with the Privacy Act 1993.**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Position in group:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Full Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Position in group:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **7. NOTICE TO THE APPLICANTS** |
| **CLOSING DATES FOR APPLICATIONS:****If you are applying for a Small NMF grant of up to $5,000:**Applications will be accepted year round and we endeavour to process within one month (except over December/January holidays). **If you are applying for a Large NMF Fund grant of $5,001 to $20,000:**Applications will be accepted twice a year. Dates for applications for Large NMF will be:**Opening Date:** 01 February**Closing Date:** 21 March**Notification of funding decision:** 26 April**Opening Date:** 25 August**Closing Date:** 14 October**Notification of funding decision:** 21 November Before applying for funding, applicants **MUST** contact **Mihi Morgan, Business Support Advisor,** to discuss their application. Assistance can also be provided to complete the application form.**Phone:** (07) 348 4199. **Email:** communityfunding@rotorualc.nz |
| **PLEASE RETURN COMPLETED APPLICATIONS TO:**Mihi MorganBusiness Support AdvisorRotorua Lakes Council1061 Haupapa Street**Private Bag 3029****Rotorua Mail Centre****ROTORUA 3046**or email application to: communityfunding@rotorualc.nz |