

# ***ECONOMIC DEVELOPMENT & EVENTS Funding***

## **Application Form**

Organisation name:

<b>For Office Use only</b>	<b>#</b>
Application received	
Funds requested	
Funds allocated	

**What is the application for?**

Economic Development Initiative

(if requesting >\$50,000 please include a Business Case with the application form).

New Event Funding

(please apply to the Community Event Fund administered by Experience Mid Canterbury in the first instance)

Existing Event Funding

(For events that have been operating in the district for 2 years or more.)

**Organisation details:**

*(including purpose, membership, history in community)*

**Status (If applicable):**

Charitable Trust

Charities Commission Number\_\_\_\_\_

Incorporated Society

(Please attach a copy of Certificate of Incorporation)

**Postal address:**

**Contact person 1:**

**Email address:**

**Phone (daytime):**

**Contact person 2:**

**Email address:**

**Phone (daytime):**

**Programme dates**

Start Date

Completion Date

## The current situation

1. What does your event / project / programme aim to change or improve?

(Why is it necessary?)

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a) What evidence do you have of the problem or opportunity your event / project / programme will address?

(This may be specific data or a general/anecdotal observation. The information could come from your own or another organisation).

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b) What is the background and/or context of the problem or opportunity?

(What has been done before? What else is happening?)

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## About the project

2. Describe your event / project / programme:

(Provide a description of the project to be funded and how it will be delivered. If you have a separate project plan (or similar), this can be attached and referred to.)

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3. Who will mainly benefit from your event / project / programme?

(Specific people, approximate numbers)

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4. What is the main **outcome(s)** your event / project / programme will achieve?

(What is the overall improvement you are aiming for? The outcome should be written as a simple, clear and concise statement that describes the intended result to be achieved. Eg: XX number of people will participate in business training programmes over an XX week period.)

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5. What are the main **outputs** that your event / project / programme will deliver?

(This is a count of the amount of the particular activity that is delivered. Eg: We will have XX businesses attend our training programmes).

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a. How will you measure your success?

(Eg. Participation numbers, feedback forms, number of returning participants etc)

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b. What data will you use to measure success?

(Eg. Surveys, attendance records/rolls etc).

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## Financial Information

6. . Please complete this simple budget outline to show how the funding would be used.  
(Applications over \$50,000 are also required to supply Annual Statement of Accounts, Balance Sheet & Monthly Bank Statements)

Event / Project / Programme budget	Council funding sought	Other funding for project	Total
Salaries/Wages			
Administration			
Accommodation/Rent			
Equipment			
Conference / Meetings			
Promotion / Marketing			
Resources (please specify e.g. stationery)			
Telephone, internet			
Travel			
Tutor Fees			
Consultants			
Other (please specify e.g. feasibility report)			
<b>TOTAL</b>			

7. What other funding are you applying for?

Organisation	Amount requested	Date results known

8. Briefly describe any voluntary effort and/or donated material provided for this project

Voluntary effort	Donated material

9. What will happen to the event / project / programme if you do not receive the full amount of the grant you have requested, including how you propose to meet any funding shortfall, if applicable?

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## Completing Your Application

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To ensure that your application is complete, please check that you have attached the following

- Quotes for the project costs
  - Confirmation of bank account details (Eg. Pre-printed bank slip)
  - Applications over \$50,000 require Annual Statement of Accounts, Balance Sheet & monthly Bank Statements
  - Certificate of Incorporation (if applicable)
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**Declaration** *This must be completed by a Contact Person listed.*

I/We hereby declare that the information supplied here on behalf of myself /our organisation, to the best of my/our knowledge, is true and correct and that I/we have the authority to make this application on behalf of our group (if applicable).

I/We hereby declare that we have a Health and Safety Plan in place for the project / programme.

I/We consent to Ashburton District Council collecting the personal contact details provided above, retaining and using these details for the purpose of review of the Economic Development and Event Funding. I/We acknowledge my/our right to have access to this information. This consent is given in accordance with the Privacy Act 1993.

I/We understand that my/our project/programme details may be used for promotion of the Economic Development and Event Funding and that I/we will be contacted if Ashburton District Council wishes to use these.

I/We understand that the funds received as a result of this application may only be used for the purpose in which they were granted and that a report form with supporting receipts must be submitted to Ashburton District Council on completion of the project / programme.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
(if completing electronically either insert digital signature or simply enter your name)

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**Applications close 5pm on Tuesday 28<sup>th</sup> February, 2016**

Electronic applications are welcomed and can be **emailed to** [info@adc.govt.nz](mailto:info@adc.govt.nz)

Alternately please **drop a copy** at the Council office on 5 Baring Square West, Ashburton

**Or Mail to:**  
Community Grants  
Ashburton District Council  
PO Box 94  
Ashburton 7740

PH: 03 307 7700