

CIF Application Form

Form Preview

Instructions

BEFORE YOU BEGIN

Welcome to the Rangitikei District Council's online grant application service, powered by SmartyGrants.

You may begin anywhere in this application form. Please ensure you save as you go.

For queries about the guidelines, deadlines, or questions in the form, please contact us on 06-327 0099 during business hours or email info@rangitikei.govt.nz and quote your application number.

Click here to view the guidelines: [community/grants-funding/community-initiatives-fund](#)

If you need more help using this form, download the [Help Guide for Applicants](#) or check out [Applicant Frequently Asked Questions \(FAQ's\)](#)

NAVIGATING (MOVING THROUGH) THE APPLICATION FORM

On the right hand side of every screen, there is a box which links directly to every page of the application. Click the link to jump directly to page you want.

You can also click 'next page' or 'previous page' on the top or bottom of each page to move forward or backward through the application.

SAVING YOUR DRAFT APPLICATION

If you wish to leave a partially completed application, press 'save' and log out. When you log back in and click on the 'My Applications' link at the top of the screen, you will find a list of any applications you have started or submitted. You can reopen your draft application and start where you left off.

You can also download any application, whether draft or completed, as a PDF. Click on the 'Download' button at the bottom of the application navigation panel.

SUBMITTING YOUR APPLICATION

You will find a 'Review' button at the bottom of the Navigation Panel. You need to review your application before you can submit it.

Once you have reviewed your application you can submit it by clicking on 'Submit' at the top of the screen or on the navigation panel. You will not be able to submit your application until all the compulsory questions are completed.

Once you have submitted your application, no further editing or uploading of support materials is possible.

When you submit your application, you will receive an automated confirmation email with a copy of your submitted application attached. This will be sent to the email you used to register.

If you do not receive a confirmation of submission email then your submission has NOT been received.

ATTACHMENTS AND SUPPORT DOCUMENTS

You may need to upload/submit attachments to support your application. This is very simple, but requires you to have the documents saved on your computer, or on a zip drive, or similar. You need to allow enough time for each file to upload before trying to attach

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another file. Files can be up to 25MB each; however, we do recommend trying to keep files to a maximum of 5MB - the larger the file, the longer the upload time. If you are not able to upload a document, please contact us for support (see contact details above).

COMPLETING AN APPLICATION IN A GROUP/TEAM

A number of people can work on an application using the same log in details as long as only one person is working at a time. Ensure you save as you go.

SPELL CHECK

Most internet browsers (including Firefox v2.0 and above; Safari; and Google Chrome) have spell checking facilities built in - you can switch this function on or off by adjusting your browser settings.

Applicant Details

* indicates a required field

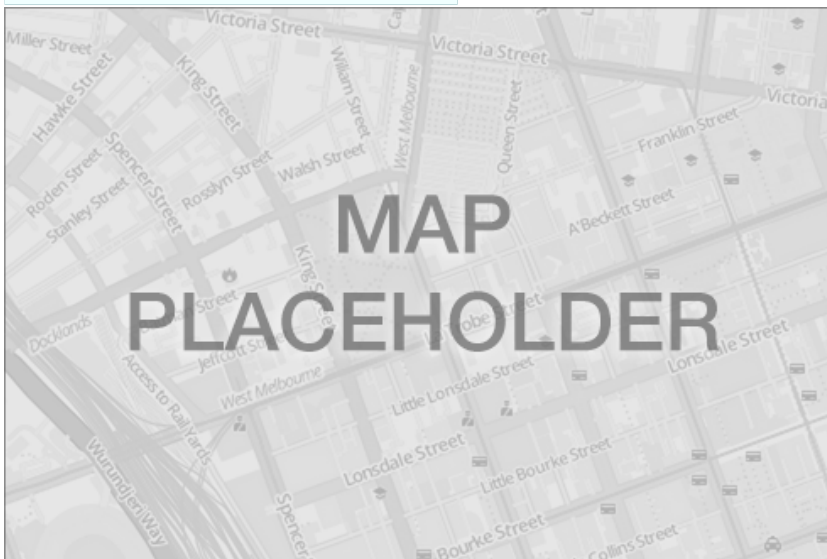
Organisation name *

Organisation Name

Contact Name: *

Organisation primary address *

Address



Address Line 1, State/Province, and Postcode are required. Country must be New Zealand

Contact postal address *

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Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Contact primary phone number *

Applicant mobile phone number

Contact primary email *

Must be an email address.

Organisation office email

Must be an email address.

Organisation primary website

Must be a URL.

Organisation NZ Charity Registration Number (CRN)

The Charity Registration Number provided will be used to look up the following information. Click Lookup above to check that you have entered the Charity Registration Number correctly.

New Zealand Charities Register Information
Charity Registration
Number
Organisation Name
Other Names
Status
Street Address
Postal Address
Telephone
Fax
Email
Website
Date Registered

Must be formatted correctly.

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Organisation NZBN

The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.

New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

Must be formatted correctly.

Organisation primary bank account *

Account Name

Account Number

Must be a valid New Zealand bank account format.

Please attach a copy of your bank deposit slip here *

Attach a file:

Are you GST registered? *

Yes

No

GST Number *

numbers only

Project Details

* indicates a required field

Project name *

Short project description *

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Word count:

no more than 300 words

Provide a short description (300 words recommended) of your project - what are you out to do?

Start date *

a date

End date *

Must be a date.

Is this a new or existing project? *

- New Existing

Please tick 1 box that best catagorises your project? *

- Community Service and Support
 Recreation and Leisure
 Heritage and Environment

Community Outcomes

Is there a specific targeted age range for this project? *

- Yes No

What is the targeted age range for this project? *

- Youth (12-21)
 Young Adults (22-30)
 Adults (30-64)
 Senior (65+)

Is there a specific target ethnic group/s for this project? *

- Yes No

For an All Community Project please select No.

What is the specific targeted ethnic group/s for this project? *

- NZ European
 Māori
 Pacific Peoples
 Asian
 Other:

No more than 2 choices may be selected.

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Project Outcomes

List 3 targets that will demonstrate the success of the project, and benefit the Rangitikei District:

Target 1 *

Target 2 *

Target 3 *

Promotion

How will the project be promoted

- Social Media
- Online Media
- Printed Material
- Newspaper
- Mail Drop
- Radio
- Other:

Finance

* indicates a required field

Total amount requested from Council *

Must be a dollar amount.

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

Budget

The assessment Committee will refer to your budget when evaluating your need for funding. It is important that the budget is clear, as any confusion may limit the amount of funding that the Committee will consider approving.

1. Please make a note next to any income source that is **tentative** and yet to be confirmed.

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2. If listing **grants** or **funds** as income items, please specify the organisation that this money is coming from. For example: *Grants (from the RDC Community Initiatives Fund)*.

Income	\$	Expenditure	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$	can add hint in here	\$

Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

Quotes

Please provide quotes for all of the expenditure listed above.

*

Attach a file:

Other Financial Information

Groups or organisations must provide a copy of their latest balance sheet (for the relevant activity). 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 which are not being used for this project, you should include your reserves statement or policy.

Upload your balance sheet here *

Attach a file:

Declaration

* indicates a required field

- I certify that to the best of my knowledge the statements made in this application are true.

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- I am authorised by my group/organisation to complete this form and I agree that:
- the statements made in this application are true
- all necessary permits/approvals will be obtained prior to the beginning of the project
- all relevant health and safety standards will be met
- council does not accept any liability or responsibility for the project.

If successful, I will:

- ensure that project requirements are met within 3 months of the nominated project completion date
- ensure that funds are claimed within three months of notification, except where there is a co-funding requirement
- accept the terms of the grant in accordance with council requirement
- complete the project within twelve months of receiving council funding.

*Question: **I agree to the above**; Type: Single Choice; Options: Yes* *Question: **Authorised Person's name**; Type: Contact - Name; Question: **Authorised Position**; Type: Open (Single Line); Question: **Telephone Number**; Type: Contact - Phone;*

I agree to the above *

Yes

Contact Name: *

Contact phone number *