

# Kapa Haka & Other Cultural Uniform Application 2024/25

## Form Preview

### Introduction

\* indicates a required field

**We encourage you to give us a call on 0800 500 185 to discuss the likely amount of funding as we use a formula to determine this.**

Also please ensure you have read and understood [whether you can apply](#) and the [funding formula](#) we use to determine the level of funding.

Please note: If you are an unincorporated organisation you can apply for up to \$2,000, otherwise you will need to work with a [Funding Partner](#).

*We are here to help if you have any queries about applying or completing the application form. Please call us on 0800 500 185 or email [info@communitytrustsouth.nz](mailto:info@communitytrustsouth.nz)*

### Organisation details

**Legal name of organisation \***

As it appears in your constitution or registration with the Companies Office

**Organisation email**

### Contact for this application

*This is who we will contact if we have any questions or require further information about your application.*

**Name \***

First Name

Last Name

**Position \***

**Primary phone number \***

**Other phone number \***

**Email \***

### Organisation overview

**Briefly describe your organisation's purpose and tell us about the types of services, programmes or activities you provide? \***

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### Your organisation's legal structure

**What is your organisation's legal structure? \***

**Please provide your NZ Business Number (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.

**[Click here to find your NZBN](#) or you can find it through the Companies Office in either [Charitable Trusts](#) or [Incorporated Societies](#)**

**Please upload a copy of your most recent AGM minutes. \***

Attach a file:

If no AGM held please attach your latest Committee/Meeting minutes

- Are you a Kaupapa Māori organisation/service that is recognised as such by Iwi, a Government Agency or Act?
- Kaupapa Māori services are those services that have been specifically developed 'by Māori for Māori' and are delivered by providers who identify as Māori.

\*

- ☐ Yes  
☐ No

**Does your project or organisation involve working with children and young people under the age of 18 years? \***

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☐ Yes

☐ No

**Does your organisation have documented child protection policies in place? \***

☐ Yes

☐ No

If 'YES' we may contact you as part of our assessment process to discuss this with you.

If 'NO' we want to encourage your organisation to have appropriate policy and practices in place.

Please [click here](#) for details of resources and training opportunities.

## Application overview

\* indicates a required field

**Provide a short title for your project**

**Describe the style/type of kapa haka or cultural uniform you would like the funding for \***

**Describe how you have engaged and/or consulted with your local runanga, marae and/or Maori community/whanau or other relevant cultural groups \***

## Outcomes

**How will having these uniforms help you to:**

- strengthen Maori (or other ethnicities) language and culture?
- increase participation in cultural traditions?
- share with others Maori or other ethnicities cultures?

## Benefits

**Approximately how many people in Community Trust's region will directly benefit from you having these uniforms \***

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### Any additional comments on numbers benefiting

### How do you ensure your service/project is inclusive?

e.g. being inclusive entails understanding that there may be barriers to some people and identifying those and addressing those barriers, e.g. people of all ages, cultural backgrounds, LGBTQIA+ communities and/or people with a disability

### What age group will predominantly benefit? \*

- ☐ Early years (prenatal-4yrs)
- ☐ Children (5-13yrs)
- ☐ Youth (14-24yrs)
- ☐ Adults (25-64yrs)
- ☐ Older persons (65+)
- ☐ All

### The following are the main ethnic groups in our region - please indicate who will predominantly benefit? \*

- ☐ NZ European
- ☐ Maori
- ☐ Pacific peoples
- ☐ Asian
- ☐ Middle Eastern/Latin American/African
- ☐ All
- ☐ Other:

### What geographical area will benefit most? \*

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Bluff             | <input type="checkbox"/> Invercargill       | <input type="checkbox"/> Wakatipu          | <input type="checkbox"/> All of Community Trust South Area |
| <input type="checkbox"/> Central Southland | <input type="checkbox"/> Northern Southland | <input type="checkbox"/> West Otago        | <input type="checkbox"/> All of Southland                  |
| <input type="checkbox"/> Eastern Southland | <input type="checkbox"/> Southern Southland | <input type="checkbox"/> Western Southland | <input type="checkbox"/> Other: <input type="text"/>       |
| <input type="checkbox"/> Fiordland         | <input type="checkbox"/> Stewart Island     |  |  |

Please refer to our detailed [CTS area map](#) for a breakdown of these areas.

Please note that we do not fund projects or programmes retrospectively i.e. projects that have commenced or have been completed before your application is submitted.

### Project start date:

### Project end date:

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### Financial details and budget

\* indicates a required field

Our funding formula

#### SCHOOL GROUPS (PRIMARY, INTERMEDIATE & SECONDARY)

**EQI 389 - 440:** 30% of the total cost

**EQI 441 - 495:** 40% of the total cost

**EQI 496 - 564:** 50% of the total cost

#### OTHER GROUPS

**Deprivation Index (Census Area Unit): 1, 2, 3 and 4:** 30% of the total cost

**Deprivation Index (Census Area Unit): 5, 6 and 7:** 40% of the total cost

**Deprivation Index (Census Area Unit): 8, 9 and 10:** 50% of the total cost

About your project budget

**Amount being requested from CTS \***

\$

**Is your organisation  
registered for GST?**

☐ Yes

☐ No

- If your organisation is registered for GST, please ensure that your budget is GST exclusive;
- If your organisation is not registered for GST, please ensure that your budget is GST inclusive.

**If you prefer you may upload a more detailed budget here and enter a summary budget below.**

Attach a file:

Project budget

#### Income

Please list all income you plan to get towards the uniforms e.g. grants/donations, other fundraising etc. **Also include the grant amount you are applying for from CTS.**

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### Expenses

Take care in determining your total project costs - don't understate what your project will cost but also don't overstate likely costs as:

- we only consider an application for the same project once and any increase in costs will be your responsibility; and
- any significant decrease between your budgeted costs and your actual costs can result in an approved grant subsequently being reduced accordingly.

Income/funding	\$	Expenses	\$
Community Trust South	\$		\$
	\$		\$
	\$		\$
	\$		\$

### 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

You should obtain two quotes where practical.

#### Please upload quote(s)

Attach a file:

**If you have uploaded one quote only, please explain why you have not sought alternative quotes.**

### Organisation financial details

#### Please upload organisation's latest annual financial statements \*

Attach a file:

#### Any additional comments (optional)

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### Upload any additional information (optional)

Attach a file:

### Organisation bank account details

#### Organisation's bank account number \*

Your bank account number needs to include: BANK (2 digits) BRANCH NUMBER (4 digits) ACCOUNT NUMBER (7 digits) SUFFIX (2 or 3 digits). Also please don't use any hypens or spaces when entering your account number.

#### Organisation's bank account name \*

This is the bank account name that appears on your a bank coded deposit slip or bank verified account details.

#### Please upload verification of organisation's bank account details \*

Attach a file:

i.e. a bank coded deposit slip or bank verified account details

## Feedback, Privacy Statement and Declaration

\* indicates a required field

### Communication

#### How did you find out about our Kapa Haka & Cultural Uniform funding \*

### Privacy Statement

Community Trust South's [Privacy Policy](#) governs our collection, storage, use and disclosure of personal information. Any personal information you provide us in connection with this application, including any information you are subsequently required to provide such as in our Accountability and Payment Forms, is subject to the Privacy Policy and you agree that we may use and disclose that information in accordance with the Policy, or as otherwise stated in this Privacy Statement and Declaration.

Where you are making this application on behalf of an organisation, information you provide for the purposes of this application that is not personal information is not subject to our Privacy Policy and we may use and disclose that information as permitted by law and as further set out in this Privacy Statement and Declaration.

Information provided by you in connection with this application (including personal information) will be used and held by the Trust, and we may share this information

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with other relevant third parties, for the purposes of administering and assessing your application.

Please indicate if you agree to Community Trust South using your personal information for the following purposes:

**Sending you Community Trust South newsletter or email updates relevant to you or your organisation \***

☐ Yes ☐ No

**Sending you information on behalf of other organisations which in the opinion of Community Trust South is relevant to you or your organisation \***

☐ Yes ☐ No

## Declaration

This declaration and authorisation relates to all information in this application, attachments and information received by Community Trust South, from you or the organisation you are making the application on behalf of, during the assessment of the application and anytime thereafter.

I hereby declare that:

- the information supplied in this application and any attachments is true and factual;
- the project has not already been started;
- any funding received will be used for the purpose for which it was approved;
- I have read, understood and agree to be bound by Community Trust South's Privacy Policy and this Privacy Statement and Declaration.

I hereby authorise Community Trust South to:

- use the information supplied as part of this application and any attachments for the purposes outlined in the Community Trust South's Privacy Policy and this Privacy Statement and Declaration;
- make any enquiries of any relevant third parties (which may involve disclosing information supplied as part of this application) which Community Trust South deems appropriate for the purposes of assessing and administering this application;
- undertake audits of our organisation/group for the purposes of assessing and administering this application, including compliance with the terms on which any funding is approved;
- Provide to other funding agencies and advertise or publish, including for marketing and promotional purposes (including on our website, facebook page, annual report and other promotional material), the name of the funding recipient (individual or organisation), the amount of any funding approved and any photographs or videos supplied by me to Community Trust South.

I acknowledge that any decision made by Community Trust South in relation to this application is final and that Community Trust South has the right to withdraw any funding approved or demand the return of funds already paid if it is discovered that any statement made in this application is incorrect, incomplete or misleading in a way that may have affected the funding decision.

Where completing this application on behalf of an organisation/group I declare that I have all necessary approvals and authorisations to complete this application, including approval from the individuals concerned (and that individual's guardian if the individual is a minor)



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for any personal information provided with this application, or subsequently in connection with the grant, including any photographs or videos containing identifiable individuals, to be used as set out in this Privacy Statement and Declaration.

**Authorised person's name \***

First Name

Last Name

**Position in organisation \***

**Email \***

**Date of declaration \***

### Submitting your form

There is a **'Review and Submit'** button at the bottom of the navigation box to the right of the screen. By clicking this your form will be reviewed to ensure all required questions (marked with an \*) are completed.

Once reviewed and all required questions are completed you can then submit your form by clicking on **'Submit'** at the top of the screen or in the navigation box.

Once submitted, you will receive a confirmation email from SmartyGrants ([service@smartygrants.com.au](mailto:service@smartygrants.com.au)) acknowledging your form has been received. If you do not receive this email please go back into your application and check you have clicked the **'Submit'** button at the top of the screen.

Once submitted no further editing of your form or uploading of further support material is possible.

If you have any queries or experience any problems please phone us on **0800 500 185** during business hours or email [info@communitytrustsouth.nz](mailto:info@communitytrustsouth.nz)