

Leadership Scholarship Application 2024/25

Form Preview

Applicants please note

* indicates a required field

Who can apply?

Before completing this application please ensure you have read and understood:

- [whether you can apply and the categories supported](#)

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

Eligibility

The following questions are to determine whether you are eligible to apply.

If you select a response which indicates you are not eligible to apply rather than progressing with submitting this application we recommend you call us to discuss our eligibility requirements.

You can contact us on 0800 500 185.

Are you a NZ Citizen or Permanent Resident? *

- ☐ Yes
☐ No

Are you aged 15 years or over? *

- ☐ Yes
☐ No

Do you currently live in the Community Trust South's area and have done so for three years or more?

- ☐ Yes
☐ No

Are you significantly involved or working in a Community/Not for Profit Organisation or Iwi/Maori Organisation in the Community Trust South's area? *

- ☐ Yes
☐ No

Are you applying before your event/activity has commenced or been undertaken?

- ☐ Yes
☐ No

The Trust does not fund retrospectively, i.e. an event that has already commenced or been undertaken at the time of this application

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Sorry you are not eligible to apply for a Leadership Scholarship.
If you have any queries about your eligibility please call us on 0800 500 185 or email michelle.baron@communitytrustsouth.nz

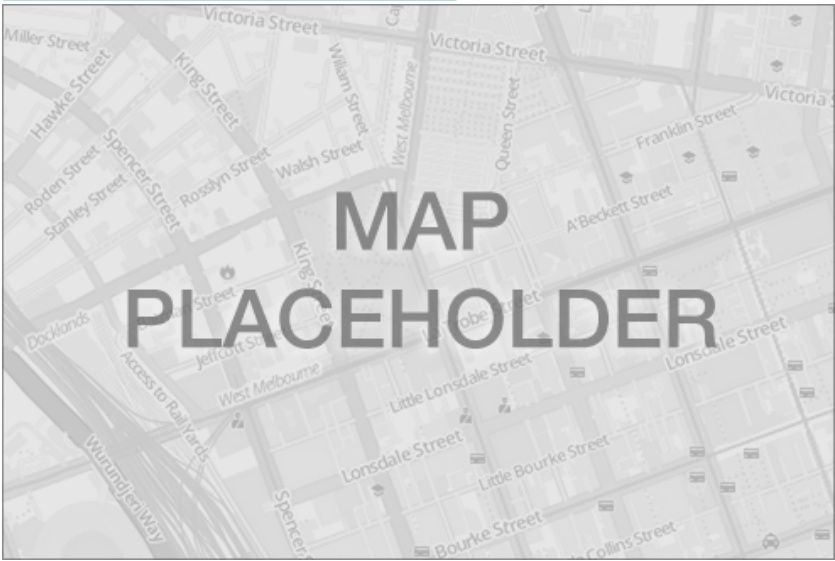
Applicant details

* indicates a required field

Contact & personal details

Full name	First Name	Last Name
	<input type="text"/>	<input type="text"/>

Permanent address	Address
	<input type="text"/>
	<input type="text"/>



Primary Contact	First Name	Last Name
	<input type="text"/>	<input type="text"/>

Primary phone number	<input type="text"/>
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Other phone number	<input type="text"/>
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Email address	<input type="text"/>
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Gender

☐ Male

☐ Female

☐ Another gender

Ethnicity

☐ NZ European

☐ Maori

☐ Pacific peoples

☐ Asian

☐ Middle Eastern/Latin American/African

☐ Other:

Iwi affiliation (if applicable)

Date of birth *

Are you over 18 years of age?

☐ Yes

☐ No

Scholarship applicants under 18 years need to include a completed Parent/Guardian Consent form as part of this application. [Click here](#) to access this form.

Please upload completed Parent/Guardian Consent Form

Attach a file:

Community and community organisation involvement

Please detail all your community and community organisation involvement, (both paid and unpaid) e.g. cultural, social, school, sporting, creative.

Name of community organisation you work for or are involved in.	What is your current position/role within the organisation?	Are you a paid staff member or volunteer?	Period of community involvement or employment
		<div><input type="checkbox"/> Paid Staff</div> <div><input type="checkbox"/> Volunteer</div>	
		<div><input type="checkbox"/> Paid Staff</div> <div><input type="checkbox"/> Volunteer</div>	
		<div><input type="checkbox"/> Paid Staff</div> <div><input type="checkbox"/> Volunteer</div>	
		<div><input type="checkbox"/> Paid Staff</div> <div><input type="checkbox"/> Volunteer</div>	

Proposed leadership course or activity

Please describe what you want the scholarship for including the name of the course or activity and a brief outline of what it covers

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Name of provider

Location

Length of course

Start date

End date

i.e. dd/mm/yyyy

Please provide details of any current or prior leadership programme/study undertaken

Potential leadership capability

What is your most significant leadership role (paid and/or volunteer) to date?

What do you consider are your current leadership qualities and skills?

What do you consider you will contribute to your organisation and the community/non-profit sector as a result of undertaking the proposed leadership course/activity?

How will a scholarship help you to progress to the next level of leadership?

Endorser details

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We will contact your endorser directly. All you need to do is provide their contact details and let them know that we will be in contact with them once we have received your application.

Endorser	First Name	Last Name
	<input type="text"/>	<input type="text"/>
Endorsing Organisation	Organisation Name	
	<input type="text"/>	
Endorsing Organisation Position	<input type="text"/>	
Endorser phone number	<input type="text"/>	
Endorsing email	<input type="text"/>	
Please describe why you have chosen this person as your endorser including how they have been involved in your community involvement and/or career development development	<input type="text"/>	

Financial details

* indicates a required field

Income (how you are going to pay for it)

Please write down all the income you anticipate you will get from all funding sources, other scholarships, your own funds, fundraising etc. Also include the amount you are applying for from Community Trust South.

Income funding source	Amount requested
Community Trust South	\$
	\$
	\$
	\$

Expenses/costs (what it is going to cost)

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Please be as accurate as possible and if applicable attach quotes.

Expenses/costs	\$
	\$
	\$
	\$
	\$
	Must be a dollar amount

Budget totals

Total Income Amount	Total Expenditure Amount	Income - Expenditure
		Your budget should balance - this number should be zero.
\$	\$	\$

Bank account details

Please provide your 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 hyphens or spaces when entering your account number.

Please provide your account name *

The account name that appears on your bank account

Please upload verification of your bank account details *

Attach a file:

e.g. screenshot of your online bank account name and number

Additional information (if applicable)

Provide any further comments here (optional)

Upload any supporting information (optional)

Attach a file:

Feedback

Communication

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How did you find out about Community Trust South?

Application process

We are always looking to improve our grantmaking processes and your feedback is essential to helping us achieve this.

Please rate the following statements:

The time required to prepare and complete the application was reasonable

The application process is very straightforward

Please let us know any suggestions about any improvements we could make to our application process.

e.g. layout of application form, length of form, did you understand the questions and what was required, was able to access assistance

Privacy Statement & Declaration

*** indicates a required field**

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 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

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☐ Yes

☐ No

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

☐ 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 South Trust'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 South Trust'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) for any personal information provided with this application, or subsequently in connection with the grant, including any photographs or videos containing identifiable individual's, to be used as set out in this Privacy Statement and Declaration.

I have read and understood this

☐ Yes

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Declaration and the Privacy Statement *

Applicant Name *

First Name

Last Name

Date of declaration *

Submitting your application

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) 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