

We can help with that



Funding Application Form

Application type

Individual
Organisation/Group

Category Our grants are distributed across three funding areas. Select which best covers your application.

Participation: Initiatives that grow community engagement through participation in artistic, cultural, recreational and sporting activities.

People: Initiatives that develop our people and their communities, particularly our most vulnerable. Including employment skills development and initiatives with an emphasis on children.

Places: Initiatives that protect and preserve our natural and physical environments.

Applicant Please print in BLOCK LETTERS. If you are applying as an Organisation, the applicant name must be the same as the Bank Account Name.

Name of individual/organisation/group

Project name Please enter a short name to identify and reference your project. (This may become how we reference your project for media purposes.)

Project summary

Please provide a description of the proposal which funding is being requested for. (A full page Personal Statement will also need to be provided with this application.)

Please tell us two or three main ways this project will benefit the community.

Why is there a need for this project?

Project location Please tell us where the project/activity will be run.

Dates If you are not applying for an event, simply leave this area blank.

Start date of event:

End date of event:

People

Expected number of people to benefit from this project/funding?

Which groups will benefit most from this funding? (You can select more than one.)

Children aged 0-12 and their families

Single-parent families

Young people aged 12-24 and their families

People with disabilities

Older people aged 65+

Other (please specify):

High-need communities

Funding

Total project costs:

Amount requested in this application:

Please tell us how the funds requested will be used. (Quotes will also need to be attached to this application.)

Please provide details of any other funding you have received for this event/project.

Other Funder Name

Amount

Is funding confirmed?

How much money have you raised for this project outside of this application?

How much more funding do you need to raise to complete the project (excluding this applications value)?

Please provide details of current funders you have applied to for the same purpose.

How do you intend to raise the balance of funds needed?

What is the term of the funding? Is the money for a single, one-off activity project, or is it for a longer period? Choose the option that best fits your activity/project timeframe.

- 1-time event
- Less than 6 months
- Less than 12 months
- 1 year
- More than 1 year

If you already have funds available, why are they not being used for this purpose?

What level of funder would We Can Help With That be?

- A lead funder
- One of a number of senior funders
- One of many funders
- Other

Will there be any significant changes to your financial situation in the next 12 months?

- Yes
- No

Applicant details Person making the application to complete.

Surname

Given name/s

Preferred name

Date of birth

/

/

(day/month/year)

Gender

Country of birth

Nationality

Name of Organisation (if applicable)

Position held

Years Organisation has operated in Northland (If Individual: Years spent living in Northland)

Contact details

Physical / residential address

Postal address

Home phone

Mobile phone

Email address

Organisation details If applicable.

Is your organisation GST registered?

Yes - if 'yes', please supply GST Number:

No

Does your organisation have IRD Charitable Status?

Yes - if 'yes', please supply IRD Number:

No

Is your organisation registered with the Charities Commission?

Yes - if 'yes', please supply your CC Registration Number:

No

Bank details If applying as an organisation, the Organisation Name must be the same as the Bank Account Name. You will also be required to attach a deposit slip.

Name of bank

Branch

Account name

Account number

-

-

-

Referees Please enter the details of at least one referee who can be contacted to endorse your project/application.

Full name

Position

Daytime phone number

Full name

Position

Daytime phone number

Full name

Position

Daytime phone number

Other

Why did you choose to approach We Can Help With That for assistance?

Please note any other relevant information that would be helpful for us to know in accessing your application?
(We also encourage you to send us any video or photographic submissions in support of your application.)

How did you first become aware of the Ray White We Can Help With That community fund? Please tick one

- | | |
|-----------------------|-----------------------------|
| Ray White team member | Social media (Facebook,etc) |
| Newspaper | Word of mouth |
| Ads/Posters | Other: |
| School | |

Application checklist Check that you have attached the following to your application

- Completed and signed Application Form (signed by a parent and/or guardian if applicant is under 18 years of age).
- Organisation/Individual bank account bank deposit slip.
- Proof of identity: a copy of either your passport, visa, birth certificate or drivers license.
- Resolution of the committee/executive meeting (if applying as an Organisation).
- Your Personal Statement explaining why you should be selected as a Ray White We Can Help With That community fund recipient.
- Quotes for each item that you are requesting funding for. (Quotes must be less than 3 months old, be addressed to the applicant and contain full supplier details.)
- Other relevant letters of reference.
- A recent photo of yourself (if applying as an individual) or your Group/Organisation.
- Any visual submissions in support of your application - photos or video. (These can be emailed to cheryl.hayes@raywhite.com)

Applicant declaration

I/We (the undersigned) make a solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957:

- I declare that the information I have supplied on this form is, to the best of my understanding and belief, complete and correct.
- I have the authority to make this application on behalf of the applicant (if the applicant is not a natural person).
- This application has not been completed by a person who has any management or ownership interest in Ray White Whangarei or Ray White Tutukaka.
- I understand that providing false or misleading information may lead to the refusal of my application or cancellation of We Can Help With That funding.
- I have read and understood the published funding information in the We Can Help With That brochure and I have sufficient information about the Ray White We Can Help With That program to apply.
- I give the Ray White We Can Help With That Assessment Committee permission to contact my referees in evaluating my application for funding.
- I understand that the Ray White We Can Help With That collects, stores and uses personal information only for the purposes of administering prospective and current funding and that the information collected is confidential and will not be disclosed to third parties without my consent, except: 1: To meet government, legal or other regulatory authority requirements. 2: To provide my parent/s and /or guardian/s information pertaining to my application for funding (where the applicant is under 18 years of age). You have the right of access to, and correction of, personal information about you, that we hold.
- As the applicant, I allow Ray White to collect information about our organisation from third parties in respect of this application.
- All of the information presented in this application - relating to the specific proposal/project for which grant funds are requested - is true. This application includes complete information relating to other sources of funding that I have received, been pledged, applied for, or intends for future application, for this and other projects. All prices and quotes included in this application represent the actual costs that will be incurred by my project/activity.
- I accept liability for payment of all other costs associated with completing my project/activity not included as part of the funding, and I agree to abide by the relevant Ray White We Can Help With That refund policy.

The information supplied in this application will be used for the purposes of assessing your eligibility and will be made available to the Ray White We Can Help With That Assessment Committee.

If you have already paid a deposit that is part of the funding you are seeking in this application or funding is spent any time prior to this application being approved and made available to you, we are unable to support that request. You may instead apply for the balance of funding. By signing I confirm that no funds being sought have already been spent by you, or committed.

By signing you agree to the above conditions and have read and accept these terms and conditions.

Applicant signature

	Date	/	/	(day/month/year)
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Parent/guardian signature If applicant is under 18 years of age.

	Date	/	/	(day/month/year)
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Parent/guardian's name in full

Address for applications

By post: **Ray White Whangarei We Can Help With That**,
 Ray White Whangarei, Goode Leith Realty Ltd,
 131 Port Road, Whangarei 0110.
 By email: cheryl.hayes@raywhite.com

Further information

Check our website for funding round closing dates: wecanhelpwiththat.co.nz
 Updates from the Assessment Committee and additional information will be provided on our Facebook page: [facebook.com/rwwhangarei](https://www.facebook.com/rwwhangarei)
 Recipients will be notified via phone.