### Louisa Patrick Emmett Murphy - 2024 Funding Eligibility Criteria

### Your organisation must be:

- Registered with Charities Services and;
- Operating or providing a service within the Auckland region.

#### **PLEASE NOTE:**

• Grants will be for a minimum of \$10,000 and or maximum of \$30,000. All funding is GST exclusive.

#### Any applications with the following circumstances will not be considered.

- · Incomplete or late applications
- Retrospective funding
- Accountability requirements from 2023 any applicant who received funding in 2023 that has not uploaded a receipt for the grant to the Smarty Grants database will not be considered. (Or who has not made alternate arrangements with the Trustee.)
- Applications from individuals, sports organisations and service clubs.
- Applications requesting funding for overseas projects.
- Applications not based in or supporting people within the Auckland region.
- Applications submitted under \$10,000 or over \$30,000.
- Financial Statements that do not comply with the Reporting Standards set by DIA Charities Services. You must attach the same completed financial statements you used with your latest Charities Filing return.

### Are you eligible to apply for funding?

\* indicates a required field

Are you eligible to apply for funding?

Before you answer the questions below please read the Trust's <u>eligibility for funding</u> <u>criteria</u>.

If you answer **no** to any of the questions below you are **not eligible to apply** to the Trust for funding. **PLEASE DO NOT SUBMIT AN APPLICATION AS IT WILL NOT BE CONSIDERED BY THE TRUST.** 

CONSIDERED BY THE TRUST.	
Is your organisation registered with Ch ○ Yes	arities Services? *  O No
Is your organisation operating within the Auckland Super City boundaries - broad    Yes   No	
Have you read the Trust's eligibility for □ Yes □ No	funding criteria? *

If you are not eligible to apply and are still looking for funding you may like to visit the Public Trust or Generosity NZ websites to search for other grant making organisations.

### **Applicant Details**

\* indicates a required field

### Organisation Details

Name of your organisation \*

### Organisation Name

If your organisation is a branch of a national body please enter your name in the following format 'ABC Group - Wellington'.

#### Please enter and lookup your Charities Registration Number, format: CC12345

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.

#### Address details

### **Postal Address** Address

Website				
Must be a URL.				
Must be a one.				
<b>Is your organisation GST Reg</b> ○ Yes	istered? *	lo		
IRD/GST Number				
Must be at least 11 characters, form	at: 012-345-678.			
Please provide your bank	details			
Note that payments will only be payments will be made to third p			our organisation	n's name. No
Bank Account * Account Name				
Account Name				
Account Number				
Must be a valid New Zealand bank a	ccount format.			
Please attach a bank deposit	slip or verificati	on of your b	ank account o	letails *
Attach a file:	•	•		
Verification of your organisation's ba organisation's name & dated within from a bank of your organisations a	the last 3 months, O	R a signed writt	en & stamped co	
	T''.			
Contact for this application *	Title First N	ame Las	st Name	
Desition Hold				
Position Held				
Contact Phone Number *				
Contact Person's Email *				
Contact i Ci Son S Linan	Must be an email a	iddress.		

### Tell us about your organisation

\* indicates a required field What does your organisation do? Tell us briefly about your organisation - what does your organisation currently do? \* Word count: Must be no more than 150 words. How many people does your organisation assist per year? \* Please show the number assisted annually by your branch within the Trust funding area. Note this for all of the work your organisation does. How many paid staff do you have? \* Please show the number of FTE for your branch within the Trust funding area. How many volunteers do you have? \* Please show the number of volunteers for your branch within the Trust funding area. What are you applying for? Funding request title \* In 10 words or less - if you had to give a brief statement to describe your funding request what would you say? e.g. Equipment (x2 wheelchairs); To provide counselling services; Operating expenses - 6 months' rent; etc. How much funding is your organisation requesting? \* Please note applications must be between \$10,000 and \$30,000. Project / Programme start date Project / Programme end date

What will this grant enable your organisation to achieve? \*

Word count: Must be no more than 200 words. Please provide specific details of your project/pro wish to purchase. What are the expected outcom	
Please select which one of the foundati	on's objectives mostly aligns with you
<ul><li>project / programme? *</li><li>□ Providing assistance and care for terminal</li></ul>	
<ul><li>☐ Improving the quality of life for our older</li><li>☐ Providing assistance and care for people</li></ul>	
Describe how the project / programme i	s aligned with the Foundation's
objectives? *	
Word count:	
Must be no more than 150 words.	
Approximately how many people do you	expect to benefit from the funding?
What is the total expected cost of your	project? *
Ψ	
If not fully funded by the Trust, how will required? Include details of other fundi	
of any fundraising efforts already unde	rtaken toward this project *
This is specifically related to the purpose of the a of your funding is confirmed?	pplication. If you are seeking other grants how
If the full amount requested is not rece ○ Yes ○ No	ived will the project still go ahead? *
Budgets, Cost and Quotes	
-	
If you are requesting funding for a	Attach a file:
project / programme / expense please attach a budget. If you are purchasing	
a specific item please attach a quote. *	

Financial Statement Balance Date \*

### Your Organisation's Financial Details

Please attach a copy of your most recent Financial Statements \*

\* indicates a required field

Attach a file:

Note that financial statements must of the reporting standards set by Depar Internal Affairs - Charities Services. Yattach the same completed financial you used with your latest Charities Fi	tment of ou must statements
Income Expenditure and A	Assets Liabilities
In the questions below please pro Statements.	ovide financial details using your most recent Financial
Total Income *	
Total Expenditure *	
Net Surplus/Deficit *	
Current Assets *	E.g. Bank Accounts, Debtors, Stock, Term Deposits maturing within 12 months.)
Non-Current Assets *	
Total Assets *	
Current Liabilities *	E.g. Overdrafts, Creditors, Unused Donations with conditions etc.
Non-Current Liabilities *	
Total Liabilities *	
Working Capital (Current Assets - Current Liabilities) *	
Sources of Funding	

Please list your organisation's top 10 sources of external funding (such as grants, government contracts & foundation income) for the next 12 months. For unconfirmed sources of funding, you may write, 'unconfirmed' next to it in brackets. E.g. ABC grant (unconfirmed).

Funding Source/ Organisation	Amount	Funding End Date		
	Must be a dollar amount.	Must be a date.		
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			

### Final information declarations

Is there any other supporting information	on you would like to upload? Please limit
to 2 documents.	
Attach a file:	

E.g. Supporting research, letters of support etc.

Our preferred format for attachments is PDF, Excel, Word or JPG.

Supporting materials cannot exceed 25MB in size, as files exceeding this will not upload.

### How did you hear about the Trust?

- I have applied to the Trust in the past.
- Word of mouth or recommendation.
- Internet (e.g. Public Trust, Facebook, search engine or other funding websites).
- Media (e.g. Newspaper or radio adverts).

### Feedback on this application process

Please estimate how many hours it took to complete this application.

Must be a number.

Include the time of all who contributed, both volunteers and paid staff.

Do you have any comments or feedback on this application process?

<sup>\*</sup> indicates a required field

### **Declaration Privacy Statement**

#### In submitting this application form I certify that:

- I am authorised by my organisation to complete and submit this application;
- I am authorised to provide and upload the personal information of our employees in accordance with the Privacy Act 2020, if applicable;
- to the best of my knowledge, all details supplied in this application and any attached documents are true and correct.

I agree that I will contact Public Trust Charities Team immediately if any information provided in this application changes or is incorrect.

I understand that if the Trust approves a grant, my organisation will be required to comply with any terms and conditions applying to the grant, including those set out on Public Trust's website, and be bound by the content of my application to apply the funding for the purpose for which it was requested. My organisation may also be required to comply with the Trust's accountability requirements, and may be asked to publicly acknowledge the donation from the Trust.

I acknowledge that the information contained in this application is stored in the SmartyGrants database and will be held by Public Trust for the purpose of assessing the application submitted by me on behalf of my organisation to the Louisa & Patrick Emmett Murphy Foundation and/or any other conjoint Trust/s.

I understand the information may be made available to other parties such as Independent Auditors in the course of enquiries regarding applications and third party suppliers for related purposes.

I acknowledge that if I do not provide all of the information requested, Public Trust may not be able to assess this application.

My Organisation gives consent for Public Trust to hold this information for no longer than is required in order to assess this application and to meet their legal requirements.

My organisation acknowledges that individuals may ask for access to personal information held about them and, if they believe the information is incorrect, they are able to request correction of that information.

I have read and	d understood th	e declaration	and privac	cy statement *
Yes				