

W R Kettle Trust - 2024 Application Form

Form Preview

W R Kettle Trust - 2024 Funding Eligibility Criteria

Your organisation must be:

- Registered with Charities Services, a School or an Incorporated Society (Individuals and Service Clubs are not eligible to apply).
- Operating or providing a service within the Trust Funding Region, being Greymouth and Cobden, the area from Otira to Kumara Junction (inclusive), the area from Greymouth to Barrytown (inclusive), and the area from Greymouth to Ngahere (inclusive).

PLEASE NOTE:

- Grants will be for a minimum of \$500 and maximum of \$5,000. All funding is GST exclusive.

Applications submitted for under \$500 will not be considered.

Any applications with the following circumstances will not be considered.

- Incomplete or late applications.
- Retrospective funding (grants to cover projects that have already occurred and been paid for).
- Applications from individuals or sports organisations.
- Applications requesting funding for overseas projects.
- Applications not based in or supporting people within the funding region.
- Applications submitted under \$500.

Are you eligible to apply for funding?

* indicates a required field

Before you answer the questions below please check the Trust's Funding Region and read the Trust's Eligibility for Funding Criteria.

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.

Is your organisation a registered charity with Charities Services, a School or an Incorporated Society? *

☐ Yes ☐ No

Is your organisation operating or providing a charitable service within the Trust's funding region? *

☐ Yes ☐ No

Have you read the Trust's eligibility for funding criteria? *

☐ Yes ☐ No

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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

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	

Please enter the number in upper case, with no space between the letters and digits. If you have entered the number correctly the fields in the grey box will populate.

Postal Address *

Address

Suburb Town/
City Postcode

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Website

Is your organisation GST Registered?

☐ Yes

☐ No

IRD/GST Number *

Bank Account

Please provide your bank details.

Note that payments will only be made to bank accounts under your organisation's name. No payments will be made to third party bank accounts.

Bank Account

Account Name

Account Number

Must be a valid New Zealand bank account format.

Please attach a bank deposit slip or verification of your bank account details *

Attach a file:

Head of Organisation

Title

First Name

Last Name

Position Held

Email

Contact for this Application *

Title

First Name

Last Name

Position Held

Contact Phone Number *

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Contact Person's Email *

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:

Please limit your answer to 200 words or less.

How many people does your organisation assist per year? *

How many paid staff do you have? *

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 – 2 Wheelchairs; To provide Counselling Services; Operating Expenses – 6 months' rent; etc.

How much funding is your organisation requesting? *

\$

Minimum request amount \$500. Please round to the nearest \$. If you are GST registered the amount requested must EXCLUDE GST.

What will this grant enable your organisation to achieve?

Please provide specific details of your project/programme. What are the expected outcomes of the funding and who will benefit?

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Describe how the project / programme is aligned with the Trust's objectives?

Word count:
Max 200 words

Approximately how many people do you expect to benefit from the funding? *

What is the total expected cost of your project/programme/expense? *

Must be a dollar amount.

If the project is not fully funded by the Trust, how will you fund the remaining amount required?

Include details of other funding applications and/or provide an outline of any fundraising efforts already undertaken toward this project.

Budgets, Cost and and Quotes

Project specific (supporting quotes, budgets etc here)

Attach a file:

Your Organisation's Financial Details

* indicates a required field

Please attach a copy of your organisation's most recent Financial Statement *

Attach a file:

Financial Statement Balance Date *

Income Expenditure and Assets Liabilities

Income

Must be a dollar amount.

Expenditure

Must be a dollar amount.

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Net Surplus/Deficit

\$

Must be a dollar amount.

Assets Liabilities

Current Assets *

E.g. Bank Accounts, Debtors, Stock, Term Deposits maturing within 12 months.

Non-Current Assets *

E.g. Property, Investments, Equipment & other assets.

Total Assets *

Current Liabilities *

E.g. Overdrafts, Creditors, Unused Donations with conditions etc.

Non-Current Liabilities *

E.g. Loans, Mortgages etc.

Total Liabilities *

Working Capital (Current Assets - Current Liabilities) *

Budget

Income	\$	Expenditure	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

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).

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Funding Source/ Organisation	Amount	Funding End Date
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Final Information Declarations

* indicates a required field

Is there any other supporting information 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, Search Engine or Other Funding Websites).
- ☐ Media (e.g. Newspaper or Radio adverts).
- ☐ Other:

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.

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I understand that if the W R Kettle 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 W R Kettle 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 W R Kettle Trust.

I understand the information may be made available to other parties such as Special Trust Advisors 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 understood the declaration and privacy statement *

☐ Yes