

### Are you eligible to apply for funding?

\* indicates a required field

Before you answer the questions below please read the Trust's Mission Statement and Funding Eligibility Criteria.

Mission Statement & Funding Eligibility Criteria ; The Trust looks to promote and advance charitable purposes in New Zealand with a primary focus on the Christchurch/Canterbury region and other charitable causes overseas through New Zealand charitable organisations and to assist New Zealand charitable organisations to build strong, inclusive and supportive communities with a Christian focus, that:

- Maintain and improve children's health, education and well-being both in New Zealand and overseas
- Work to provide preventative education and support and improve the quality of life for at risk families within New Zealand
- Maintain and improve the quality of life and health aid for families and poverty stricken communities
- Through New Zealand charitable organisations - provide disaster relief and aid in crisis situations.

This may be through targeted grant making that either compliments other funding sources or, targets projects where alternative sources of funding are not available.

Grants will focus on supporting organisations and projects that address specific issues and needs relative to the Trust's Mission Statement.

The maximum grant will be \$10,000

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.

**Have you read the Trust's Funding Eligibility Criteria? \***

Yes

No

**Is your organisation registered with Charities Services? \***

Yes

No

If you answer no to any of the questions above 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 BOARD.

### Applicant Details - Tell us about your organisation

\* indicates a required field

#### Organisation Details

# David Ellison 2020 Application Form

## Form Preview

**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

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/    Postcode  
                  City

        

Must be a New Zealand post code

**Website**

Must be a URL

**Is your organisation GST Registered?**

Yes

No

# David Ellison 2020 Application Form

## Form Preview

**IRD/GST Number \***

Must be at least 11 characters, format: 012-345-678.

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.

**Organisation's Bank Account Name**

e.g. ABC - Wellington Inc

**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**

Must be an email address

**Contact for this Application \***

Title

First Name

Last Name

**Position Held**

**Contact Phone Number \***

Please provide a daytime contact phone number, including the area code.

**Contact Person's Email \***

Must be an email address.

What is the primary objective(s) of your organisation?

**Tell us briefly about your organisation - what do you currently do? \***

# David Ellison 2020 Application Form

## Form Preview

Word count:

Please limit your answer to 200 words or less.

**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.

## Why do you need Funding?

\* indicates a required field

**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? \***

Please round to the nearest \$. The maximum grant limit is \$10,000. If you are GST registered the amount requested must EXCLUDE GST.

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

**If you are purchasing a specific item please attach a quote.**

Attach a file:

**Who in your community is this project / programme supporting as per the objectives of the Trust? \***

- Providing assistance and care for at risk families
- Improving the quality of life for people
- Children's health, education and well-being
- Disaster relief and aid in crisis situations

# David Ellison 2020 Application Form

## Form Preview

### Project and or Programme start date

Must be a date.

### Project and or Programme end date

Must be a date.

### Please provide more detail of your project/programme and its expected outcomes

\*

Word count:

In 200 words or less please provide details of your project/programme, the expense you wish to pay or item you wish to purchase.

### Describe how the project/programme supports one or more of the Trust objectives \*

Word count:

In 150 words or less

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

### Please indicate the area/region your organisation will support with this grant? \*

Christchurch  Elsewhere in Canterbury  North Island  South Island  Overseas  Other

### If the full grant requested is not received, will the project/programme still go ahead?

### Tell us how you will fund the remaining balance required? Include details of other funding applications you have made.

This is specifically related to the purpose of the application. If you are seeking other grants how much of your funding is confirmed?

## Your Organisation's Financial Details

\* indicates a required field

# David Ellison 2020 Application Form

## Form Preview

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

Attach a file:

**Financial Statement Balance Date \***

Note: Financial Statements must comply with the Reporting Standards set by DIA - Charities Services.

## Income & Expenditure

In the questions below please provide financial details using your most recent Financial Statements.

**Total Income \***

**Total Expenditure \***

**Net Surplus/Deficit \***

## 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) \***

### 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.

### Declaration & Privacy Statement

**I certify that:**

- I am authorised by my organisation to complete and submit this application;
- 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 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.

By submitting an application my organisation consents to the information collected by Public Trust being used for the purpose of assessing this application and any other application for funding made to other Trusts administered by Public Trust. I acknowledge that if I do not provide all of the information requested, Public Trust may not be able to assess my application. My organisation also consents to the information supplied in this application being made available to other parties in the course of enquiries regarding applications and/or publishing the results of funding approved. I acknowledge that individuals may ask for access to personal information held about them and, if they believe the information is incorrect, they can request correction of that information.

Funding recipients may be asked to publicly acknowledge the donation from the Trust.

**I have read and understood the declaration and privacy statement \***

Yes