

# Frozen Funds - Application 2022

## Form Preview

### Frozen Funds Charitable Trust - 2022 Funding Eligibility Criteria

Your organisation, or the organisation you are applying through must be:

- Registered with Charities Services.
- Applications may be submitted by individuals or groups without charitable status. **However**, individual or groups without charitable status must apply through a registered charitable organisation that has agreed to administer the funds on their behalf.

#### PLEASE NOTE:

- Applications must be for people who use, or have used, mental health or intellectual disability services.
- Projects need to be run by and for people with intellectual disabilities and mental health illness.
- Applications must show evidence how service users are going to be involved in the project/programme.
- Applications must be directly linked to and able to demonstrate how they address the theme (**The priority this year is to focus on rural and isolated areas. The Board is looking to fund projects / programmes that clearly demonstrate support for the community (participation, career support, leadership development, self-advocacy and peer support).**)
- The maximum to be applied for is \$10,000.

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

- Incomplete or late applications
- Retrospective funding
- Accountability requirements from 2021 - any applicant who received funding in 2021 that has not uploaded a receipt and an accountability report for the grant to the SmartyGrants database will not be considered. (Or who has not made alternate arrangements with the Trustee.)
- Applications from individuals who do not apply through a registered charitable organisation, sports organisations and service clubs.
- Applications requesting funding for overseas projects.
- Applications submitted over \$10,000.
- 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 you latest Charities Filing return.
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### Are you eligible to apply for funding?

\* indicates a required field

#### Funding Eligibility Criteria

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Before you answer the questions below please read the Trust's [Funding Eligibility Criteria](#) and check the Grant Round's Theme.

Individuals who need assistance with their application are encouraged to seek it from the charitable organisation they are applying through, or another trusted person or agency. Unfortunately the Frozen Funds Charitable Trust cannot offer assistance with completing applications.

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**

**Are you applying as an organisation, or an individual, or a group (without charitable status)? \***

- Organisation (Registered with Charities Services)
- Individual
- Group (not registered with Charities Services)

**Is your organisation or the organisation you are applying through registered with Charities Services? \***

- Yes
- No

**Have you read the Trust's funding eligibility criteria and the grant round's theme. \***

- Yes
- No

## Applicant Details

\* indicates a required field

### Organisation Details

**Name of your organisation or the organisation you are applying through \***

Organisation Name

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

### Individual or group

**Name of individual or group**

Only complete section 2 if you are applying as an individual or group through a Charitable organisation

**What is the individual / groups credentials to provide the project?**

Please limit your answer to 100 words or less.

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**Please attach a CV for individuals**

Attach a file:

**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 spaces between the letters and digits. If you have entered the number correctly the fields in the grey box will populate.

**Is your organisation GST Registered?**

Yes

No

**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.

If your organisation is applying on behalf of an individual or group the Trust will deposit the grant to the organisation's bank account as the organisation administers the funds on their behalf.

**Bank Account \***

Account Name

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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:

Verification of your organisation's bank account can either be; a full bank statement issued in your organisation's name & dated within the last 3 months, OR a signed written & stamped confirmation from a bank of your organisations account number dated within the last 3 months.

**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.

## Tell us about your organisation, or yourself, or your group

\* indicates a required field

**Please tell us about your organisation / self? \***

Word count:

Must be no more than 150 words.

**How many paid staff do you have?**

Only complete if you are applying as an organisation. Please show the number of FTE for your branch.

**How many volunteers do you have?**

Only complete if you are applying as an organisation. Please show the number of volunteers for your branch.

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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? \***

\$

NOTE: the maximum grant amount that you can apply for is \$10,000. Please round to the nearest \$. If you are GST registered the amount requested must EXCLUDE GST.

**Tell us about the project or mahi you're applying for funding for? \***

Word count:

Must be no more than 250 words.

Please provide specific details of your project/programme, the expense you wish to pay or item you wish to purchase. What are the expected outcomes of the funding and who will benefit?

**Please tell us how you think this fits our funding theme? \***

Word count:

Must be no more than 200 words.

**What sector is this project supporting? \***

Mental Health Sector       Intellectual Disability Sector

If this project is supporting both sectors please chose the one that will receive greater share of the funding support.

**How many people/service users is this project intended to reach? \***

Must be a number

**Which of the following population groups will your project reach (tick all that apply): \***

- Older people
- People with disabilities
- Pasifika
- Youth
- People with current significant health considerations
- People with a background as a migrant and/or refugee
- Rainbow communities
- People who are rurally isolated
- Don't know
- Other:

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If 'other', please specify

**If this project is not managed by people with intellectual disability or people with lived experience of mental distress, please give evidence of how you will work in partnership with them.**

Word count:

Must be no more than 150 words.

### Where will the project operate?

- |                                     |   |                                 |                                  |
|-------------------------------------|---|---------------------------------|----------------------------------|
| <input type="radio"/> Nationwide    | <input type="radio"/> Hawke's Bay           | <input type="radio"/> Northland | <input type="radio"/> Tasman     |
| <input type="radio"/> Auckland      | <input type="radio"/> Manawatu-<br>Wanganui | <input type="radio"/> Otago     | <input type="radio"/> Waikato    |
| <input type="radio"/> Bay of Plenty | <input type="radio"/> Marlborough           | <input type="radio"/> Southland | <input type="radio"/> West Coast |
| <input type="radio"/> Canterbury    | <input type="radio"/> Nelson                | <input type="radio"/> Taranaki  | <input type="radio"/> Wellington |
| <input type="radio"/> Gisborne      |   |                                 |                                  |

### What is the total expected cost of your project? \*

\$

### Project start date

### Project end date

### If the full grant requested is not received will the project still go ahead? \*

- Yes  
 No

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

Word count:

Must be no more than 100 words.

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

What will you use the Frozen Funds funding for? Please provide a high level breakdown of the costs you are asking us to fund. This should show us what you would spend our funding on.

***This should add up to the total you are requesting from the Frozen Funds Trust - the answer to the previous question.***

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<b>Expenditure</b>	<b>\$</b>
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

### Budgets, Cost and Quotes

**Project specific - Please attach supporting quotes, budgets etc. here**

Attach a file:

### Your Organisation's Financial Details

\* indicates a required field

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

Attach a file:

**Financial Statement Balance Date \***

Note that financial statements must comply with the reporting standards set by Department of Internal Affairs - Charities Services. You must attach the same financial statements you used for the latest Charities Filing return.

### Income & Expenditure and Assets & Liabilities

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

**Total Income \***

**Total Expenditure \***

**Net Surplus/Deficit \***

**Current Assets \***

E.g. Bank accounts, debtors, stock, term deposits maturing within 12 months.

**Non-Current Assets \***

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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) \***

### 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).

<b>Funding Source/ Organisation</b>	<b>Amount</b>	<b>Funding End Date</b>
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	Must be a dollar amount.	Must be a 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:



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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).
- Facebook
- Media (e.g. Newspaper or radio adverts).
- Other:

## 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(s) for which it was requested. My organisation may also be required to comply with the Trust's accountability requirements.

If the project produces any written material or DVD's the finished article is to be supplied free of charge to Public Trust in PDF or other electronic format. You authorise Public Trust to provide those copies free of charge to the Mental Health Foundation and the Donald Beasley Institute (Dunedin) to be held in their online libraries or website in a PDF version so that individuals and organisations can have access to and download this finished material free of charge. On this basis, you grant the Mental Health Foundation and the Donald Beasley Institute and those individuals and entities who access the materials through those two entities an irrevocable worldwide license to redistribute, copy, use or modify, and adapt those materials, provided that they acknowledge the source of the material and do not charge anyone for access to those materials.

By submitting an application I/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. It is acknowledged that if all of the information requested is not provided Public Trust & the Trust Board may not be able to assess the application. I/My organisation also consents to the information supplied in this application being made available to other parties in the course of enquiries regarding application and/or publishing the results of funding approved. It is acknowledged 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 grant from the Trust.

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

Yes