

LOTTERY

**COMMUNITY**  
**Te Tahua Whakatinana Papakāinga**  
**Grant Application Form**



NZ Lottery Grants Board  
TE PUNA TAHUA  
Distributor of NZ Lottery Profits

You can apply online at [www.cdgo.govt.nz](http://www.cdgo.govt.nz). If you are not going to apply online you may submit this form.

**Before you start filling out this form**, read the *Lottery Community Information Sheet* and the *Lottery Grants Board General Information Sheet* to help you decide whether you are eligible for a grant.

You must complete all sections of the form.

Need more help? If you have any questions about this form, call our freephone **0800 824 824**.

In submitting this application you and/or the organisation you represent (hereafter referred to as the "applicant"), acknowledge and agree that the Department of Internal Affairs may disclose to or obtain from any other government department or agency, private person or organisation, any information about the applicant for the purposes of gaining or providing information related to the funding of the applicant.

All successful Lottery grants may be used for publicity purposes by the Lottery Grants Board and the New Zealand Lotteries Commission. The successful applicants must identify a spokesperson by name along with their contact details. This nominated spokesperson may be contacted by the above agencies and also by the media.

To view any personal information held by us, or if you have any concerns about personal information that we hold, please write to:  
The Privacy Officer, The Department of Internal Affairs, P.O. Box 805, Wellington 6140.

OFFICE USE ONLY:

Client number:

Application number:

Date received:

Date acknowledged:

 **SECTION A: CONTACT DETAILS**

**A1. What is your group's name?** *(If you have a registered name please use this - and if you are a local branch of a national organisation please specify - e.g. New Zealand Family Society, Manawatu)*

Full name of group

**A2. What is your group's address?**

Postal address

City/Town

Physical address *(If different from above)*

City/Town

**A3. What are your group's contact details?**

Phone number

Email address

Fax number

Website address

**A4. Who is your group's main contact for this Lottery application?**

First name

Last name

Position

Daytime phone number

Alternative phone number

Fax number

Email address

**A5. Who is your group's second contact for this Lottery application?**

First name

Last name

Position

Daytime phone number

Alternative phone number

Fax number

Email address

**A6. Have you received a Lottery grant before?**

 YES NO

**A7. Do you want your application to be considered as part of a group of applications from your national organisation?**

 YES NO



Note A

**Ethnic Groups**

Main Ethnic Group	Specific Category
NZ European	Pakeha/NZ European
Māori	Māori
Pacific	Cook Islander Fijian (Note: Fijian Indian is listed under Asian) Niuean Samoan Tokelauan Tongan Tuvaluan/Elice Islander Other Pacific (eg Kiribati, Solomon Islands) Various Pacific (3 or more Pacific ethnicities)
Asian	Bangladeshi Chinese Fijian Indian Filipino Indian Indonesian Japanese Khmer/Kampuchean/Cambodian Korean Pakistani Sri Lankan Taiwanese Chinese Vietnamese Other Asian
African	Eritrean Ethiopian Somali South African Sudanese Zimbabwean Other African
European	Anglo-Celtic Continental European Other European
Latin American	Latin American
Middle Eastern	Afghani Assyrian Iraqi Iranian/Persian Kurd Lebanese Palestinian Turkish Other Middle Eastern
All ethnic groups	



## NOTES FOR PAGE 5

### Note B

#### Region

Please select one of the following regions from the list below. You may enter as many local authority area(s) within this region as appropriate.

Region	Local Authority Area(s)	
Northland	Kaipara District Whangarei District	Far North District
Auckland	Auckland City Manukau City Rodney District Waitakere City	Franklin District North Shore City Papakura District
Waikato	Franklin District Hauraki District Otorohanga District South Waikato District Thames-Coromandel District Waipa District	Hamilton City Matamata-Piako District Rotorua District Taupo District Waikato District Waitomo District
Bay of Plenty	Kawerau District Rotorua District Tauranga District Western Bay of Plenty District	Opotiki District Taupo District Whakatane District
Gisborne	Gisborne District	
Hawke's Bay	Central Hawke's Bay District Napier City Taupo District	Hastings District Rangitikei District Wairoa District
Taranaki	New Plymouth District South Taranaki District	Ruapehu District Stratford District
Manawatu-Wanganui	Horowhenua District Palmerston North City Ruapehu District Tararua District Wanganui District	Manawatu District Rangitikei District Stratford District Taupo District Waitomo District
Wellington-Wairarapa	Carterton District Kapiti Coast District Porirua City South Wairarapa District Wellington City	(Lower) Hutt City Masterton District Tararua District Upper Hutt City
Nelson-Marlborough-Tasman	Marlborough District Tasman District	Nelson City
West Coast	Buller District Westland District	Grey District
Canterbury	Ashburton District Christchurch City Kaikoura District Selwyn District Waimakariri District Waitaki District	Banks Peninsula District Hurunui District Mackenzie District Timaru District Waimate District
Chatham Islands	Chatham Islands District	
Otago	Central Otago District Dunedin City Waitaki District	Clutha District Queenstown-Lakes District
Southland	Gore District Southland District	Invercargill City
Nationwide		

**D4. Will a Lottery grant be used mostly to provide services to people in:**

Rural areas

Urban areas

Both

**Which region will your project primarily provide services in?**

*(See Note B on the facing page for options)*

**Which local authority area or areas, within this region, will your project provide services in? (If your project provides services in all local authorities within this region, please write 'all')**

*(See Note B on the facing page for options)*

**D5. Please select up to three sectors from the list below that you believe will most benefit from services your group will provide as a result of a Lottery grant:**

People with disabilities

Youth

Family violence prevention

Family/whānau

Women

Older people

New migrants/refugees

Unemployed

No specific sector

Youth at risk/disadvantaged

Children

**D6. Approximately how many people directly benefit from your group's services or programmes?**



## SECTION E: ABOUT THE FUNDS

**E1. What is the overall cost of the project?**

**E2. How much funding are you requesting from the Lottery Community Committee? Please insert amounts beside the purposes you are requesting in the table below. You should refer to the Lottery Community Information Sheet for an explanation and examples of the purpose items listed in the table. (Note: If your group is GST registered, all requested amounts must be GST exclusive and rounded to the nearest dollar. If your group is not GST registered, all requested amounts must be GST inclusive.)**

PURPOSE ITEM	\$ AMOUNT REQUESTED
Activity, resource and/or programme costs	
Administration costs	
Care and support costs	
Community awareness	
Complete projects	
Domestic travel costs	
Feasibility Studies and Information Collection	
Minor capital works building projects	
Regional and national gatherings or events	
Salaries	
Training and supervision costs	
Volunteer costs/expenses	
OTHER	
<b>TOTAL AMOUNT REQUESTED</b>	<b>\$</b>

**Please complete the following boxes for each salary position that you're requesting funds for.**

*(Note: If your organisation is applying for more than three salary positions, provide the required information on a separate sheet of paper and enclose it with your application.)*

Title of the position

Number of paid hours per week



An existing position

Part time

A new position

Full time

Title of the position

Number of paid hours per week



An existing position

Part time

A new position

Full time

Title of the position

Number of paid hours per week



An existing position

Part time

A new position

Full time

**E3. Tell us about any other sources of funding for this project.** (Note: Include any grants or monies that you have applied for and the amount that has been granted to your organisation. Also include any donations, subscriptions, loans, debentures or fundraising amounts.)

FUNDER DESCRIPTION	\$ APPLIED FOR	DECISION DATE	\$ GRANTED
<b>TOTALS</b>	<b>\$</b>		<b>\$</b>

**E4. If your group does not receive the full amount requested, how will your group make up the difference?**


**E5. If your group does not receive the full amount requested, what will happen to your project?**




**SECTION F: FINANCIAL POSITION** (See Note C on the reverse of this page for explanations)

**F1. What is your group's most recently completed financial year?**

Start date

/  /  (day / month / year)

End date

/  /  (day / month / year)

**What was your group's total income for that period?**

**What was your group's total expenditure for that period?**

**At your balance date, what were your group's total *current* assets?** (e.g. Bank accounts, term deposits, accounts receivable, etc.)

**At your balance date, what were your group's total *current* liabilities?** (e.g. Money you owe others in the next financial year, bank overdrafts, accounts payable, etc.)

**Grants to groups without legal status are limited to a total from all committees of no more than \$10,000 to any group in any financial year (the New Zealand Lottery Grants Board financial year is 1 July - 30 June.)**

### Note C

### Financial Position

#### ANNUAL ACCOUNTS

Annual accounts supplied in support of an application should be no older than 16 months at the time of the application closing date.

##### Applications for less than \$40,000

1. Applicants for amounts of less than \$40,000, where the group has been in existence for *16 months or more* at the application closing date, are required to submit their most recent signed annual accounts.
2. Applicants for amounts of less than \$40,000 where the group has been in existence for *less than 16 months* at the application closing date are required to submit:
  - (a) (i) the most recent Statement of Financial Performance, verified by a suitably qualified person<sup>1</sup>  
*Note: For applications from groups that have only supplied a Statement of Financial Performance, the end date of the Statement should be no older than 3 months at the application closing date.*  
(ii) a bank statement less than one month old at the time of application, or
  - (b) (i) a bank statement less than one month old at the time of application, if the group has not yet commenced operations.

##### Applications for \$40,000 and over

3. Applicants for amounts of \$40,000 or over, where the group has been in existence for *16 months or more* at the application closing date, are required to submit their most recent signed annual accounts audited by a person who has recognised accounting qualifications.<sup>2</sup>
4. Applicants for amounts of \$40,000 or over, where the group has been in existence for *less than 16 months* at the application closing date are required to submit:
  - (a) the most recent annual audited accounts, or
  - (b) (i) the most recent Statement of Financial Performance available, verified by a person with recognised accounting qualifications<sup>2</sup> and  
*Note: For applications from groups that have only supplied a Statement of Financial Performance, the end date of the Statement should be no older than 3 months at the application closing date.*  
(ii) a bank statement less than one month old at the time of application, or
  - (c) (i) a budget, verified by a person with recognised accounting qualifications<sup>2</sup>, and  
(ii) a bank statement less than one month old at the time of application

##### Receipt of Grant Funds

5. The receipt of grant funds must be acknowledged as a separate entry in the group's accounts, or in a note to the group's accounts, in the group's annual report and in any media publicity resulting from the grant.

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<sup>1</sup> A suitably qualified person is someone independent of the group and has reasonable knowledge of finance and accounting, for example is a bank manager or retired accountant or is a person who holds recognised accounting qualifications as listed below.

<sup>2</sup> Recognised accounting qualifications means an accounting graduate (B.Com Accounting or equivalent), an Associate Chartered Accountant, Chartered Accountant or Accounting Technician or some other specified accounting or auditing qualification and experience.



