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Your organisation

* indicates a required field

Purpose and criteria of the fund

The purpose of Hamilton City Council's Welcoming Communities Fund is to support and enable *Welcoming Communities projects/activities* which align to the outcomes of the Welcoming Plan as follows:

- 1.**Inclusive leadership;** Leaders both designated and unofficial reflect the diversity in the local community.
- 2. **Welcoming Communications**; People of all cultures and backgrounds feel included, listened to and well informed.
- 3.**Equitable Access**; Opportunities to access services and activities and to participate in the community are available to all, including newcomers.
- 4.**Connected and Inclusive Communities;** People feel safe in their identity, that they are connected with and belong in the community.
- 5.**Economic Development, Business and Employment;** Newcomers are supported to access local employment information, services and networks.
- 6.Civic Engagement and Participation; Newcomers are encouraged and enabled to get involved in local government and civil society.
- 7.**Welcoming Public Spaces;** Provide opportunities to build trust and relationships between newcomers and members of the receiving community.
- 8.**Culture and Identity;** There is a shared sense of pride in being part of a culturally rich and vibrant community. People feel their culture is respected and valued. There are opportunities to learn about each other's cultures.

For further details and a full explanation on each outcome please check our Welcoming Plan Hamilton - Te Waharoa Ki Ngaa Hapori Kirikiriroa

The Welcoming Communities Fund round is open until all grant money has been allocated. The funding pool is \$75,000 and up to \$5,000 per application.

Priority will be given to applications from community organisations that are:

- Eligible to apply (see below), and are
- Applying for *projects/activities* which align to at least one of the outcomes of the Welcoming Plan, and
- Applying up to \$5,000 per application.
- Collaborative projects are encouraged.

Note: Applications requesting a new development or extension of an existing programme where newcomers benefit, may be considered. Talk to our team before you apply.

Generally Council funds community organisations which meet the following criteria:

- They are legally constituted as not-for-profit community organisations (charitable trusts or incorporated societies) and have been operating for a minimum of 12 months.
- They have the capacity to deliver the project as outlined in their application.
- They have records such as a bank account, annual accounts, minutes of meetings.
- They agree to the terms and conditions of any potential grant as outlined in their grant agreement.

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• They agree to provide further information on request, and to provide accountability for any funds received.

Note: If you wish to apply, but do not meet the above criteria, please contact Gary Ho email - Gary.Ho@hcc.govt.nz. (Groups may be considered if they apply under the umbrella of another organisation).

What will not be funded?

- Projects or operational costs already substantially funded by Hamilton City Council.
- Retrospective funding i.e. specific projects that have already started or have been completed.
- Religious Ministry regarding the teaching or preaching of their faith.
- Activities considered core Government responsibility e.g. teaching of the school curriculum.
- Political organisations or social clubs.
- Repayment of debt, Loans (or loan guarantees), rates remittance, community leases or rentals, mortgage repayments or investments of any kind.
- Any projects or activities that would generally be considered illegal or are contrary to Councils aims and objective.
- Travel and accommodation.
- Prizes, cost of goods to be raffled or any costs associated with fundraising.

When will I know the outcome?

The funding round will remain open until early June 2025, unless the funds have been fully allocated prior to this. Once submitted, applications will be assessed at regular intervals. It could be up to 4-8 weeks before the outcome of your request is known. Please plan your project dates accordingly as Council does not fund retrospective requests.

Who can help me with this application?

Council have Funding Advisors that can help your group complete this application form. If you would like the support of a Grants Distribution Advisor, please email Gary.Ho@hcc.govt.nz for assistance.

Does your service, programme ○ Yes	or activity take place in Hamilton? * O No	
Is your group a * O Incorporated Society Please check this link if you are not sur be-or-not-to-be-incorporated-societies-a	 Registered Charitable Trust e. https://www.charities.govt.nz/news-and-events/blog/gand-charitable-trusts/ 	what-to
Does your organisation have a	bank account? * *	
○ Yes	O No	
Has your organisation been ope	erating more than 12 months? *	
○ Yes	○ No	
Do you have a set of annual fine performance reports? *	ancial accounts including financial statemen	ts and
○ Yes	○ No	
For more info: please check https://www	w.charities.govt.nz/reporting-standards/about/	

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Organisation name *				
	Please enter the registered (legal) name of your organisation.			
Contact person *	Title	First Name	Last Name	
	Please enter application.	the name of the pri	imary contact person for this	
Contact phone number *				
·	Please enter the contact phone number for the primary contact			
	given above.			
Contact email address *				
	Please enter above.	the email address f	for the primary contact given	
Organisation Details:				
Organisation Details:				
What is the main purpose of	your organi	sation? *		
Must be no more than 50 words				
What programmes or services	s does your	organisation p	rovide? *	
Must be no more than 100 words				
How many people do you hav	e that volu	nteer their time	to support the running of	
your organisation? *				
Your Project				
* indicates a required field				
Project name *				
Tell us about your				
project - what do you want to achieve? *				
	Word count No more than			

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Which newcomer group will primarily benefit from the project? *	
How many individuals are expected to benefit from your project? *	Please provide a realistic estimate of the number of individual people who benefit each year from all the services delivered by your organisation. For example if one person attends five times throughout the year they are counted as one person.
Please select one main Welcoming Plan outcome your project aligns to *	 ○ 1. Inclusive leadership; Leaders both designated and unofficial reflect the diversity in the local community. ○ 2. Welcoming Communications; People of all cultures and backgrounds feel included, listened to and well informed. ○ 3. Equitable Access; Opportunities to access services and activities and to participate in the community are available to all, including newcomers. ○ 4. Connected and Inclusive Communities; People feel safe in their identity, that they are connected with and belong in the community. ○ 5. Economic Development, Business and Employment; Newcomers are supported to access local employment information, services and networks. ○ 6. Civic Engagement and Participation; Newcomers are encouraged and enabled to get involved in local government and civil society. ○ 7. Welcoming Public Spaces; Provide opportunities to build trust and relationships between newcomers and members of the receiving community. ○ 8. Culture and Identity. There is a shared sense of pride in being part of a culturally rich and vibrant community. People feel their culture is respected and valued. There are opportunities to learn about each other's cultures
How does your project meet the outcome selected above? *	
Project start date	The date the project starts.
Project end date	The date the project is completed.
Project Benefits:	

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Please describe how the wider community will benefit from your project? *	Wand sound
	Word count: No more than 300 words
How will you measure the success of your project? *	
	Word count: No more than 200 words
Additional Information:	
Please feel free to add any a application.	dditional comments or information relevant to this
Word count: No more than 500 words.	
Other relevant attachments: Attach a file:	
Financial Information	
* indicates a required field	

Project Budget (Compulsory)

A project budget is essential. If your organisation is GST registered, **DO NOT** include GST in these costs.

Please complete the budget table below. **Please specify your sources of income and if** they are confirmed (c) or unconfirmed (uc). **Please make this budget as accurate** as possible.

If you have any *queries or need help with this budget section* - please email our Grants Distribution Advisor, Gary.Ho@hcc.govt.nz

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

Budget Totals

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Total Income Amount	Total Expenditure Amount	Income - Expenditure	
\$	\$	\$	
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	
Total cost of project (A) *	Must be a dollar amount. What project?	at is the total cost (dollars) of your	
Total income of project (B) *	\$ Must be a dollar amount. What is the total income (doll	ars) towards your project?	
Difference (A-B) *		ated. B) = balance required. If this figure ease complete budget shortfall	
Amount requested from this Welcoming Community Fund *	\$		
Financial summary of y	our organisation:		
Total Annual Income *			
	Please enter your total annua shown on your annual accour	l income of your organisation as	
Total Annual Expenditure *	Please enter your total annua as shown on your annual acco	l expenditure of your organisation ounts.	
Latest Annual Financial	Attach a file:		
Statements (Annual Accounts) *	Please attach your latest annual financial statements eg: Statement of Financial Performance (Income and Expenditure), Statement of Financial Position (Balance Sheet) etc.		
Attach your Summary	Attach a file:		
Bank Statement here (must show organisation name) *	Please attach a summary list	of your bank accounts showing you ne, current balances, including term	

Declaration

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* indicates a required field

In making this declaration I declare that:

- 1.I am authorised to do so and to the best of my knowledge, the information contained herein is true and correct.
- 2. Any grant received will be used for the project for which it was approved.
- 3. The organisation will comply with any reasonable request from Hamilton City Council to monitor performance and accountability.
- 4. This organisation is fully compliant with all applicable legislation, including part 3 of the requirements under the Children's Act 2014 to safety check your volunteers and staff (if applicable).
- 5.I understand that HCC is required to disclose information regarding this grant, if requested by a third party, under the Local Government Official Information Act.
- 6.Hamilton City Council will advise our organisation of the outcome of this application. If successful, an authorised person from this organisation will complete a Grant Agreement Form and upload an invoice for payment through SmartyGrants.
- 7.Any grant received will be used for the project for which it was approved. Once funds have been spent this organisation will complete the required accountability form.
- 8. This organisation is aware that the personal information that you provide in this form will be held and protected by Hamilton City Council in accordance with our Privacy Statement. A copy of the policy is available here Privacy Policy and at our libraries, pools and the Municipal Building, Garden Place in accordance with the Privacy Act 1993. The Privacy Statement explains how we can use and share your personal information in relation to any interaction you have with the Council, and how you can access and correct that information. You should familiarise yourself with this Statement before submitting this form.
- 9. This organisation is aware that organisation and personal information collected will be held by Hamilton City Council for the purpose of assessing applications and may be shared with other parties in the process of assessing or in publishing or making available the results of approved grants.

Full Name of Organisation *	
Full Name of Authorised Signatory *	
Position of Authorised Signatory *	
Date of Declaration *	