

# Arts Grants for Ethnic Communities in the Western Bay District

## Form Preview

### Eligibility

\* indicates a required field

#### Applicants: please note

This fund has been established to harness creativity to promote social cohesion and culture within the communities located in the Western Bay of Plenty district. The fund encourages inclusive creativity through cultural celebrations and engagement, supporting ethnic communities to feel connected and providing opportunities to participate in society.

The definition of ethnic communities is as follows:

*Ethnic communities include migrants, former refugees, long-term settlers, and multi-generational New Zealanders who identify as African, Asian, continental European, Latin American, and Middle Eastern.*

[Click on this link](#) to download a map which shows the Western Bay of Plenty district boundaries. Your activity needs to take place within this geographic area.

#### **Further information, advice or help making an application:**

Contact Annie Hill, Creative Bay of Plenty's Strategy & Capability Lead, on email [annie@creativebop.org.nz](mailto:annie@creativebop.org.nz) or telephone 021 579 348.

### Criteria

- Projects must celebrate cultural arts such as drama, visual or object art, music, dance, performance, creative writing, and photography, and must engage the community.
- To extend our opportunity to partners across the district, applicants can be both for profit and not-for-profit organisations. However, submissions will not be considered from organisations intending to make a profit from the activity applied for.
- Applications must demonstrate impact within the Western Bay of Plenty district boundary and must be open to the wider community, where appropriate.
- The project must have a defined start and finish date or time. Projects cannot have started or finished when funding applications are submitted.
- Applications are capped at a maximum of \$2,000 per project.

### Confirmation of Eligibility

#### **I confirm that ...**

- I have read and understand the guidelines
- I am able to demonstrate alignment between this project and the aim of this fund
- I will deliver the project in Western Bay of Plenty.

#### **Please select below: \***

Yes  No

You must confirm that all statements above are true and correct to continue.

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### Contact Details

\* indicates a required field

#### Privacy Notice

We will respect and uphold your rights to privacy protection under the information privacy principles in the New Zealand Privacy Act 2020. To view our specific privacy statement that is applicable to your application and this online grant administration service, go to our Western Bay of Plenty District Council Smarty Grants privacy statement. [Grants and Funding - Privacy Statement - Western Bay of Plenty District Council](#)

In addition to collecting information directly from you, we may also collect information about you from third parties, (who you have consented the collecting of information from) as part of your application.

**Please consent below: \***

Yes

No

#### Contact Details

**Are you applying as an Individual or on behalf of an Organisation? \***

Individual

Organisation

**Applicant organisation name**

Organisation Name

If you are applying on behalf of an organisation, please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation.

**Primary contact person \***

Title

First Name

Last Name

This is the person we will correspond with about this grant

**Position held in organisation**

e.g. Manager, Board Member, Fundraising Coordinator

**Primary phone number \***

**Primary contact person's email address \***

This is the address we will use to correspond with you about this grant.

**Applicant Primary Bank Account \***

Account Name

# Arts Grants for Ethnic Communities in the Western Bay District

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Account Number

   

Must be a valid New Zealand bank account format.  
Format: XX-XXXX-XXXXXXXX-XX

### Confirmation of Bank Account \*

Attach a file:

Please attach a deposit slip or document showing your bank logo and bank account number for funds to be paid into.

### Are you GST registered? \*

- Yes  
 No

If yes, please enter your GST number below.

**If you are GST registered, please enter your number below:**

## Project Details

\* indicates a required field

### Project Details

**What does your project celebrate [select as many as applicable]: \***

- |  |  |
|--|--|
| <input type="checkbox"/> Drama             | <input type="checkbox"/> Music                       |
| <input type="checkbox"/> Creative writing  | <input type="checkbox"/> Dance                       |
| <input type="checkbox"/> Photography       | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Cultural festival |  |

**What is your idea (include the creative / cultural and community engagement components)? \***

Word count:

Provide a description (350 words recommended) of your project.

**Who is involved in delivering the project?**

Briefly list (bullet points) the specific activities that will take place and where they will take place (200 words recommended)

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### Which of Western Bay of Plenty District Council's wards will this grant provide services within? \*

- Katikati/Waihi Beach Ward
- Te Puke/Maketu Ward
- Kaimai Ward
- Multiple Wards

At least 1 choice must be selected.

To view a map of the different wards, go here: <https://www.westernbay.govt.nz/repository/libraries/id:25p4fe6mo17q9stw0v5w/hierarchy/community/about-the-western-bay/documents/Councillors%20Map%20Print%20version.pdf>

### How will your project positively benefit the community? \*

#### Word count:

Describe three changes you will see if the expected outcomes of the project occur (150 words recommended)

### How will you ensure your activity is open to the wider community?

#### Word count:

Provide a description (250 words maximum)

### Which ethnic group will primarily benefit from this project? \*

- African
- Asian
- European
- Latin American
- Middle Eastern
- Pacifica
- South African European
- Other:

At least 1 choice must be selected.

## Project Timing

#### When will it start? \*

Must be a date and between 14/12/2024 and 30/6/2025.

Estimated start date of project.

#### When will it finish? \*

Must be a date and no later than 30/6/2025.

If unknown, provide your best guess or leave blank.

#### Total Amount Requested \*

Must be a dollar amount and no more than 2000.

What is the total financial support you are requesting in this application? The amount requested must be no more than \$2,000.

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How many active participants do you anticipate?

How many audience members do you anticipate?

If the funding is for specific project costs, please list these?

Expenditure Description	Expenditure Type	Expenditure Amount (\$)	Notes
		\$	
		\$	
		\$	
		\$	

**Attach your budget here (include all expenses and income, including volunteer/in-kind): \***

Attach a file:

Please ensure the quotes include GST.

**Have you received any other funding support for this initiative (please list)?**

**Are you awaiting the outcome of any funding applications (please list)?**

## Declaration

\* indicates a required field

### Declaration

This section must be completed by an appropriately authorised person (may be different to the contact person listed earlier in this application form).

**I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.**

**I agree \***

Yes

No

# Arts Grants for Ethnic Communities in the Western Bay District

## Form Preview

**Name of authorised person \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be a senior staff member, board member or appropriately authorised volunteer

**Position**

Position held in applicant organisation (e.g. CEO, Treasurer)

**Contact phone number \***

Must be a New Zealand phone number.

**Contact Email \***

Must be an email address.

**Date of declaration \***

Must be a date