



Creative Communities Scheme (CCS) Application Form

Funding for local arts

Ngā kaupapa auaha a te iwi whānui Te tono pūtea mō ngā manahau a te iwi kāinga

Read the Creative Communities Scheme (CCS) Application Guide

This guide tells you -

- > if you are able to apply for a CCS Grant for your project
- > what information you will need to include in your application
- > how to submit your application.

You can print this document out and handwrite your application or you may like to save a copy of this application to your desktop and enter the information this way. If you need more space attach information to the back of this application form. Please include the section number and heading for easy assessing.

Contact the CCS administrator if you need advice on your application.				
Jan Maxwell				
Arts and Events Facilitator				
Queenstown Lakes District Council				
PH 03441 0469				
027 2337934 Email: jan.maxwell@qldc.govt.nz Applicant details				
Are you applying as an individual or group?				
☐ Individual ☐ Group				
Full name of applicant				
Contact person (for a group)				
Daytime phone number				
Postal address				
All correspondence will be sent to this address.				
Street/PO Box				
Suburb				
Postcode City				
Email				
Ethnicity of applicant Please tick and provide detail e.g. Ethnicity: Pacific Island, Detail: Samoan.				
Ethnicity Detail				
☐ NZ European				
☐ Māori				
☐ Pacific Island				
Asian				
Middle Eastern/Latin American/African				
☐ Other				

	unt name and number
	unds will be deposited if your application is successful.
Name	
Account numb	oer *
1 Proje	ct details
Project nar	ne
For example, S	South Taranaki children's ceramic workshops.
Brief descr	iption
For example, s	ix ceramic workshops during the school holidays for children aged 8–12.
Does your	project have an arts or creative cultural focus?
Does your	project have an arts or creative cultural focus?
Yes	☐ No roject take place within the city or district where the

Funding criteria
Which of the scheme's three funding criteria are you applying under. Please select one. If your project meets more than one criteria, choose the one that is the project's main focus.
You can find examples of each criteria in the CCS Application Guide page 10
Participation: Create opportunities for local communities to engage with, and participate in local arts activities.
Diversity: Support the diverse arts and creative cultural traditions of local communities.
Young people: Enable young people (under 18 years) to engage with, and participate in the arts.
If you do not know which of the three fits your project, contact your CCS administrator.
2 The idea/He aha te kaupapa
2 The idea/He aha te kaupapa See the CCS Application Guide on page 2
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stimated n	number of active	participants		
	number of active			
Estimated n	number of attende	ees		
Estimated n		ees		
Estimated n	umber of attende	ees		
The bu	udget/He pūte	ees		
The bu	umber of attende	ees	□ No	
The butter the street of the s	udget/He pūte	ees] No	
The but some some some some some some some some	udget/He pūte	ees ea Yes		nts.
The but have you GST number f you are GS	udget/He pūte will it cost? T registered?	ees ea Yes include GST in	these amou	

Project costs

Write down all the costs of your project and include the details.

For example materials, venue hire, promotion, equipment hire, artist fees and personnel costs.

■ See CCS Application Guide page 6

Item	Detail	Amount
e.g. Hall hire	e.g. 3 days hire at \$100.00 per day	e.g. \$300.00
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
A: Total cost		\$

Project income

Write down *all* the income you will get for your project from ticket sales, sale of artwork, other grants, donations, your own funds, other fundraising. Do not include the amount you will be requesting from CCS.

Detail	Amount
e.g. 250 tickets at \$15.00 per ticket	e.g. \$3,750.00
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

Calculate your requests from CCS using this table.

B: Less total income \$ C: Difference \$ P: Amount requested from CCS \$	A: Total cost of project	\$
	B: Less total income	\$
D: Amount requested from CCS \$	C: Difference	\$
Ψ / tillouit requested from eee	D: Amount requested from CCS	\$

Financial background

Tell us about any other funding you have applied for or received for this project (including funds from Creative New Zealand's other funding programmes).

Date applied	Source of funding	Type of funding e.g. grant	Date of result	Amount
				\$
				\$
				\$
				\$
				\$

Tell us about other grants you have received through CCS in the past three years.

Date	Project title	Have you submitted a project completion report for this project?	Amount
			\$
			\$
			\$
			\$
			\$

Groups or organisations must provide a copy of their latest financial statement.

This can be a copy of the audited accounts, an income and expenditure statement or a copy of the unaudited management accounts.

If your group or organisation has reserves which are not being used for this project you should include your reserves statement or policy.

Which of the following artfo	rms best describes your project?
lease select one. If your projec ombined arts.	t combines more than one artform select
See CCS Application Guide pag	e 6 for definitions of each artform
Combined arts	☐ Māori arts
Craft/Object art	☐ Music
Dance	☐ Pacific arts
Film	☐ Theatre
Literature	☐ Visual arts
	rities best describes your project?
lease select one. See CCS Application Guide pag	
.,	e a for definitions
Creation and presentation	
Creation and presentationPresentation only (performar	oce or concert)
Presentation only (exhibition	·
Trescritation only (exhibition)	<i>)</i>

What is the cultural tradition of your project?

The cultural tradition of your project relates to the particular heritage that your project is part of. Cultural tradition **does not relate** to your group's ethnic affiliations or geographical origins.

Select the cultural tradition that best relates to your project and give additional information if needed.

For example, a kapa haka performance would be categorised as Māori arts or a traditional Polish dancing workshop would be Cultural tradition: European, Detail: Polish.

Cult	ural tradition	Detail
	European	
	Māori arts	
	Pacific arts	
	Asian	
	Middle Eastern/Lat	in American/African
	Other	

8 Declaration

I/We understand that if this application is successful I/we cannot receive funds for the same project from Creative New Zealand's other funding programmes.

I/We declare that the details contained in this application are correct and that I/we have authority to commit to the following conditions.

If this application is successful, I/we agree to:

- > complete the project as outlined in this application
- > complete the project within a year of the funding being approved
- complete and return a project report form (this will be sent with the grant approval letter) within two months after the project is completed
- > return any unspent funds

- > participate in any funding audit of my organisation or project conducted by the local council if required
- > contact the CCS administrator to let them know of any public event or presentation that is funded by the scheme
- > acknowledge CCS funding at event openings, presentations or performances
- > use the CCS logo in all publicity (e.g. poster, flyers, e-newsletters) for the project and follow the guidelines for use of the logo. Logo and guidelines can be downloaded from www.creativenz.govt.nz/logo.

I understand that the Queenstown Lakes District Council

- > is bound by the Local Government Official Information and Meetings Act 1987
- I/we also consent to it recording the personal contact details provided in this application, retaining and using these details, and disclosing them to Creative New Zealand for the purpose of evaluating the Creative Communities Scheme
- I/we understand that my/our name and brief details about the project may be released to the media or appear in publicity material
- I/we undertake that I/we have obtained the consent of all people involved to provide these details. I/we understand that I/we have the right to have access to this information
- > this consent is given in accordance with the Privacy Act 1993.

Name			
Signature			
Name and signatur	e of parent or guard	lian if applicant is un	nder 16 years of age:
Name			
Signature			
Position in organis	ation if applicable		
Date			

How did you hear about this fun	d?			
Council website	Radio			
Council mail out	Social media			
☐ Council staff member	☐ Word of mouth			
Creative New Zealand website	Other (please give detail):			
Local Newspaper				
☐ Poster/flyer				
9 Final check				
9 I mai check				
Make sure you have				
☐ Completed all the sections				
Checked that your budget balances	S			
Provided quotes and financial detai	ls			
☐ Attached supporting documents				
Submitting your application				
Mail your application to:	Email your application to			
Queenstown Lakes District Council	jan.maxwell@qldc.govt.nz			
Private Bag 50072				
Queenstown 9300				
Courier or hand deliver your application	on to:			
Queenstown Lakes District Council				
10 Gorge Road, Queenstown				
Or 47 Ardmore Street, Wanaka				