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**He kai kei aku ringa (HKKAR) Fund 2018**

**Application form**

**Before filling out the application form it is recommended that you read the application guidelines.**

**You can download them from the Te Puni Kōkiri website** [**tpk.nz/hkkar**](http://tpk.nz/hkkar)

#### Sections of the application form to complete

|  |  |  |
| --- | --- | --- |
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#### Application form

1. **Your details**

This section captures the formal details of your organisation. This helps us to ensure your eligibility and provides us with correct information for any contract.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Organisation name** |  | | | | | |
| **Address** | **Registered** | | *This is the physical address that your organisation has registered with e.g. the companies office* | | | |
| **Physical** | | *If different from above* | | | |
| **Postal** | | *If different from above* | | | |
| **Legal Status** | *What is the legal status of your organisation?* | | | | | |
| **Registration/incorporation number** | *If this is not available please attach a copy of your Trust Deed or other documents that establishes your organisation* | | | | | |
| **GST Registration** | **Is your organisation GST registered** | | **Yes** |  | **No** |  |
| **What is your GST number** | |  | | | |
| **Financial Statements** | *Please supply a copy of your audited accounts for the past two years in your completed application.* | | | | | |
| **Primary contact** | *This person has overall responsibility to manage this project* | | | | | |
| **Role or position** |  | | | | | |
| **Contact details** | **Landline** |  | | | | |
| **Mobile** |  | | | | |
| **Email** |  | | | | |
| **Secondary contact** | *This person has overall responsibility to manage this project* | | | | | |
| **Contact details** | **Landline** |  | | | | |
| **Mobile** |  | | | | |
| **Email** |  | | | | |

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|  |

**Umbrella organisation**

If your organisation is not a legal entity and your application is being made with the support of an umbrella organisation, please provide details of the umbrella organisation.

If your application is successful, this organisation will be required to sign the funding agreement on your behalf, and take legal responsibility for delivering the project.

|  |  |  |
| --- | --- | --- |
| **Type of organisation** |  | |
| **Lead contact** | *(This person will have the overall responsibility to manage this project).* | |
| **Role or position** |  | |
| **Contact details** | **Landline** |  |
| **Mobile** |  |
| **E-mail** |  |

**Your aims**

Please provide a brief overview of your organisation, who it represents and what it aims to achieve.

1. **Proposal details**

**Project description**

Describe the purpose of your funding request. We want to know what He kai kei aku ringa (HKKAR) will potentially be funding, including:

• Why this project is being undertaken?

• Who will benefit from this investment (the target group)?

• How this investment will support whānau, hapū and iwi Māori to meet their aspirations within the five focus areas of HKKAR?

• How this project tests innovative initiatives and ideas to support new developments in the five focus areas?

• How this application supports our preferred delivery approach?

• What impact the project will have on specific targets as set out in the five focus areas? How you will measure this? And how you will collect data?

**What do you hope to achieve?**

We want to know what your project will achieve and how it will benefit whānau, hapū and or iwi. Please link these to the focus areas and their associated targets.

|  |  |  |
| --- | --- | --- |
| Outcome or objective | Explain how the impact of your project achieves these outcomes or objectives | What does success look like for you? |
|  |  |  |
|  |  |  |
|  |  |  |

**What are your deliverables?**

Tell us about your deliverables and when you expect them to happen.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | | Deliverable – what are you going to produce? | Amount | Due | | E.g. project plan approved |  |  | | Stage 1 milestone |  |  | | Stage payment request |  |  | | Stage 2 milestone |  |  | | Report delivered |  |  | | Report approved |  |  | | Stage payment request |  |  | | Case study complete |  |  | | Final evaluation report delivered |  |  | | Final payment request |  |  | |  |

1. **Project management details**

**What is the role of your organisation in this project?**

**Who will have overall responsibility to manage the project?**

**What is your organisation’s capacity and capability to manage this project?**

Tell us about your organisation’s governance and management structure. How will this support the delivery of the project? What skills and experience does your organisation have to complete this project successfully?

**What is your approach to communicating with stakeholders and community groups?**

2. **Risk management**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| In this section we want to make sure you have considered any possible risks to your project and how you might address (or mitigate) them. Please complete this section in two parts.   |  |  | | --- | --- | | Part | Action | | One | Using the **table below**, identify each risk, no matter how big or small. We have provided an example of the type of content you should note. | | Two | Using the ‘heat- map’ description (Appendix 1), classify the **likelihood of the risk occurring** and the **impact if the risk occurs.** Do thisfor each risk you have identified. |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Risk Identified** | **Existing Controls** | **Likelihood** | **Impact** | **Rating** | **Planned Treatment** | | *i.e. Tickets don’t sell* | *Event is being advertised in the local paper and on the local radio station* | *Possible* | *Moderate* | *M* | *Additional marketing on social media and flyers* | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |

1. **Funding details**

In this section we want to know what financial support, and what support in kind you could be receiving that will contribute to the success of your proposal.

Please be aware that the full funding may not be available and your organisation may be granted part of the requested amount.

**Budget summary**

Please include all funding needs and sources in this table.

|  |  |
| --- | --- |
|  | **$ ex GST** |
| What is the total cost of your proposal? |  |
| How much funding is your organisation seeking from HKKAR? |  |
| What contribution will your organisation make to the proposal? |  |
| What financial contribution will be made by other organisations? |  |
| **TOTAL** |  |

|  |  |  |
| --- | --- | --- |
| Have contributions to be made by other organisations been confirmed? | Yes | No |
| Are other organisations making non-financial contributions? | Yes | No |

**Partner financial contributions**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Organisation** | **What is the contribution for?** | **$ ex GST** |
| Please list other organisations contributing financially and the amount |  |  |  |
|  |  |  |
|  |  |  |

1. **Budget breakdown**

Use this table to provide a full breakdown of your budget. Please note the items in the left column are examples and should be added or removed as required. Please continue on another page if needed.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Your organisation’s contribution | Te Puni Kōkiri potential investment | Other source  (organisation’s name) | Other source  (organisation’s name) | Other source  (organisation’s name) | TOTAL |
| *List the item and cost* |  |  |  |  |  |  |
| *List the item and cost* |  |  |  |  |  |  |
| *List the item and cost* |  |  |  |  |  |  |
| *List the item and cost* |  |  |  |  |  |  |
| *List the item and cost* |  |  |  |  |  |  |
| *Telecommunications* |  |  |  |  |  |  |
| *Advertising* |  |  |  |  |  |  |
| *Equipment Hire / Lease* |  |  |  |  |  |  |
| *Facilitator/Coordinator* |  |  |  |  |  |  |
| *Venue* |  |  |  |  |  |  |
| *Kai costs* |  |  |  |  |  |  |
| *Training and Development* |  |  |  |  |  |  |
| *Contractors* |  |  |  |  |  |  |

1. **Disclaimers**

Please note and consider any questions in this section carefully and answer as completely as possible.

**Conflicts of interest**

Are there any conflicts of interest between you as the applicant, or the umbrella organisation, **and** your providers **or** HKKAR? If so please give a brief description.

A conflict of interest occurs where a person or organisation is compromised when their personal interests or obligations conflict (negatively or positively) with the person or organisation they are dealing with. It means that independence, objectivity or impartiality of funding decisions from HKKAR could be called into question.

A conflict of interest can be:

* actual: where the conflict already exists
* potential: where the conflict is about to happen, or could happen
* perceived: where other people might reasonably think that a decision has been compromised.

When conflicts of interest cannot be avoided they need to be managed. Further discussion with Te Puni Kōkiri staff may be required.

**Previous projects and funding**

Please describe any funding your organisation has previously received from Te Puni Kōkiri.

Has this project previously been submitted for funding consideration by any other government agencies?

**Are you a provider of children’s services?**

If you are a provider of children’s services[[1]](#footnote-1) and some or all of the contract is about providing children’s services, then you must provide us with a copy of your Child Protection Policy.

Disclaimers, (continued)

**Privacy Act 1993**

Te Puni Kōkiri is required to comply with the provisions of the Privacy Act 1993.

Equally, organisations collecting personal information on Te Puni Kōkiri’s behalf will comply with the provisions of the Privacy Act 1993.

Te Puni Kōkiri requires the personal information requested in this document to process your funding application. We will use the information for this purpose only.

You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong.

For a copy of your information, or to have it corrected please contact us at Te Puni Kōkiri PO Box 3943 Wellington.

**Publishing information about funded projects**

From time to time, Te Puni Kōkiri and Ministry of Business, Innovation and Enterprise may need to publish the names of organisations that were funded on our website, or in public communications.

This may include:

• the name of (your) organisation.

• a short summary that describes your project, the start date and completion date.

• a short description about the numbers and location of whānau who will benefit or have benefited from your project.

• HKKAR approved funding amounts.

If this is likely to happen, we will contact you beforehand.

1. **Declaration**

**This declaration is to be completed by an authorised signatory of your organisation.**

In signing this declaration, I certify that;

1. To the best of my knowledge, the information contained in this proposal is true and accurate;
2. This proposal complies with the objectives of my organisation as contained in the Organisation’s Constitution, Trust Deed or Māori Land Court order; in support of this statement I have attached a note from an authorised member of the organisation or a copy of Minutes from an Executive Committee or Board of Trustees meeting, approving the proposal;
3. There exists no undeclared conflicts of interest for me, any other member of the organisation or employee of Te Puni Kōkiri, in making this application;
4. All sections of the application form have been completed;
5. All supporting documentation required have been attached;
   1. In signing this declaration, I understand that;
6. There is no guarantee that my organisation will be successful in securing Te Puni Kōkiri investment;
7. Te Puni Kōkiri may collect information about my organisation from any third party in respect of this application;
8. If the proposal is successful, the name of my organisation, the purpose of the investment and the Te Puni Kōkiri investment amount will be made available as part of Te Puni Kōkiri’s accountability for public funds;
9. The information provided in this document can be used by Te Puni Kōkiri for statistical purposes and/or policy development;
10. I (the applicant) along with the target group and beneficiaries of the proposed project may be required to participate in an evaluation of the project; and

I (the applicant) will accept full accountability and responsibility for all requirements associated with the completion of the project.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(To be signed by the Chairperson or authorised signatory)

Date: \_\_\_\_\_\_\_\_\_\_\_

#### Appendix One – Risk management heat map

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Rating** | **Impact** | | | | | | **Likelihood** | **Negligible** | **Minor** | **Moderate** | **Major** | **Severe** | | Very Likely  (80-100%) | M | M | H | E | E | | Likely  (50-80%) | L | M | H | H | E | | Possible (20-50%) | L | M | M | H | H | | Unlikely (5-20%) | L | L | M | H | H | | Rare (<5%) | I | L | M | M | H |  | Indicator | Impact | | --- | --- | | Severe | * threatens the survival of organisation or key personnel * has wide ranging financial, political or reputational consequences * leads to adverse legal decisions * causes a significant health and safety incident | | Major | * threatens continued effective functioning of project * requires the intervention of top-level management * has financial or political consequences * attracts undue public awareness | | Moderate | * threatens existing manner of operation * causes measurable and observable impact * threatens operational/financial stability of project * requires co-management and/or external resources | | Minor | * threatens some functions but would be dealt with internally * has minimal impact on performance/contained by routine operations * has some internal and/or external implications but is controllable | | Negligible | * can be handled with by routine operations * has negligible impact on performance * has no internal or external implications | |

1. Children’s services are defined as:

   Services to one or more children

   Services to adults in respect of one or more children

   Services provided to adults living in households that include one or more children and that:

   do or may affect significantly any one or more aspects of the well-being of those children; and

   Maybe prescribed/defined by the Governor-General by Order in Council. (Note: You can check if your service is included in an Order in Council on [www.legislation.govt.nz](http://www.legislation.govt.nz)). [↑](#footnote-ref-1)