



GRANT APPLICATION FORM

Please read our Grants Policy.

1. **Full name** of applicant or group:
2. **Contact** person (for a group):
3. Email:
4. Phone number:
5. Are you applying as an individual or a group?

Individual

Address if living in Ōtorohanga:

Or tell us how you are associated with Ōtorohanga District:

Group (please tick as many as are applicable)

- Registered charity (provide number) CC.....
- Incorporated society
- Charitable trust
- Charitable company
- Marae Reservation
- Informal group
- Other, please specify:

6. **What are you seeking a grant for?** (Please describe your project in detail including when it will happen.)

7. How will your project benefit the Ōtorohanga District?

8. Project budget

Item	Cost
TOTAL	\$

9. Project funding

Source of funding (e.g. fundraising, grant applications, sponsorship, donations)	Amount	Confirmed (yes or no)
TOTAL		

10. Amount requested from Ōtorohanga Charitable Trust:

11. Do you give permission for us to share information about what you do or any grant we may approve to you on our Facebook page or other social media? Yes No

12. Please attach:

- Supporting information (e.g. letters of support, quote)
- For groups: your most recent set of financial statements (required)
- Proof of bank account details for account any grant will be paid into (required)

13. Signed

Name

Position

Please email completed application to info@otoct.org.nz

You will be contacted by the Trust after your application has been considered.