

# Selwyn Residents Group Fund Application Form

Before completing this application form please read and understand the General Criteria & Rules for all Council Administered Grants

1. Group Name: \_\_\_\_\_

2. Contact person:

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone (day) \_\_\_\_\_ Cell \_\_\_\_\_

Alternative contact person

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone (day) \_\_\_\_\_ Cell \_\_\_\_\_

3. Project/Initiative/Event name: \_\_\_\_\_

4. Estimated total number of people benefitting from this project/initiative/event: \_\_\_\_\_

5. Please describe your project/initiative/event:

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6. Who is your target audience? (e.g children, young people, adults, families, older adults, other)

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7. Do you require waste management support from Selwyn District Council? Please tick the appropriate box(s):

- ☐ Usage of Council waste and recycling event wheelie bins
- ☐ Advice for waste management and recycling
- ☐ Assistance with waste and recycling fees

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8. What benefits do you expect from this project/initiative/event for Selwyn District?

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9. Please provide a full budget for this project/initiative/event, including income and expenditure:  
(Complete here or attach separately)

Income (GST exclusive)	
Total	\$

Expenditure (GST exclusive)	
Total	\$

10. Please state how much you are applying to the Residents Group Fund for:

Amount: \$
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11. What specifically will this amount be used for?

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12. If you have applied to any other body for grants for this project/initiative/event or if you have applied for or received any funding from the Selwyn District Council in the current financial year (July 2018-June 2019), please specify to whom and for how much:

Organisation	Amount applied for/received	Purpose of funding
e.g Selwyn District Council	\$200	Facility hire from July–September

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13. I hereby declare that the above information is correct. If the application is successful, my group agrees to provide within one month after the project/initiative/event has taken place:

- a) A full report on the project/initiative/event (report template provided)
- b) A selection of 5 photos with permission to be reproduced for Selwyn District Council promotions
- c) An expenditure return

Signed: \_\_\_\_\_ Designation: \_\_\_\_\_

Group: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Please return completed application to: [selwyncommunityfund@selwyn.govt.nz](mailto:selwyncommunityfund@selwyn.govt.nz)