

P: 211 3740 PO Box 208, Invercargil www.ilt.co.nz	l, 9840 252	2 Dee Stree	et, Invercarg	jill	E: <u>ilt@ilt.c</u>	<u>o.nz</u>
Name of Applicant Organisation: (must be sa	ame as bank acc	ount name)				
Address:			Telei	ohone	Number	&
Email:						
Physical:						
Postal:						
Two contact names		Role		Cel	l Phone No.	
Primary:						
Secondary:						
Total Grant Requested from ILT				\$		
What is the grant to be used for? (Please be	specific & include	dates and loc	cation – use a s	separate s	sheet if necess	sary)
If funding request is for Wages please advis Name of Employee & Role		Annual Salary Amount		Total Requested Amount		
i.e. Joe Blogs, Coach	\$50,000	π	······	,000		
	\$		\$			
(NB: employment contracts may be requested)						
What is the purpose of your organisation?						
How many people belong to the organisat number?	ion applying?	Ple	ease explain	how yo	ou calculate	d this
How many people would benefit from th number?	is grant?	Plea	se explain l	now yo	u calculate	d this
Please detail <u>how</u> people will benefit from the second se	n <mark>is grant</mark> (use a	separate shee	et if required)			
What is the legal status of your organisation Trust		rporated So		Not-for	•	
	Club	Other .				
Does your organisation work with Ye children?		lf 'Yes', doe Child Prote	es it have a ction Policy	? Yes		
Is your organisation registered with the Cha	arities Commis	sion?	res 🗖 CC		No	
Are you GST registered? Ye If GST registered, funding will not include any GST.	es 🛛 No 🖾	GST No:				
What is your NZ Business Number? (refer w	<u>ww.nzbn.govt.nz</u>)					
Budgets (Please attach the following to this app	olication)					

1) Organisation's approved budget (income & outgoings) for the <u>coming 12 months.</u> If funding is for a specific event, please also attach a separate event budget.

2) For applications made prior to 1 April 2021, please include a note advising how Covid-19 has affected this year's budget and what changes you have made because of this.

3) Most recent financial statements (*if currently being audited please provide a draft copy*).

NB: Financial information on reserves/cash on hand/investments must be included

- 4) If your application is for a one off project or event, please also attach two quotes for costings.
- 5) Please include details on fundraising you have done or intend to do, towards the funding applied for.

PLEASE COMPLETE OTHER SIDE OF FORM ALSO

Has the organisation applied for, or received funds, in the last 12 months from any other source? i.e. CTS, ICC, Lotteries, MSD, MBIE, Government Wage Subsidy, Sponsorships YES/NO (*If Yes, give full details, using separate sheet if necessary*)

Received From:	Purpose Given For:	Amount:
		\$
		\$
		\$
		\$

Please attach a copy of the organisation's resolution to apply for funding to the ILT. e.g. <u>Committee</u> <u>minutes</u>

Declaration

- We declare that the information provided in this grant application is true and correct, to the best of our knowledge, and we have the authority to make the application on behalf of the applicant.
- This organisation fully understands that any and all grant monies received from ILT can only be used for the purpose for which the grant was approved. Copies of invoices, receipts and bank statements (where applicable), along with any unspent funds, will be returned to ILT after the funds have been applied towards the purpose for which the grant was made.
- We authorise ILT to retain information pertaining to this application and to disclose that information as deemed necessary by ILT for any purpose, including the publication of grants information.
- We have read, understand and accept all the conditions applicable to this application for a grant.

Signature: 1	 Signature: 2	
Printed Name:	 Printed Name:	
Role:	 Role:	
Date:	 Date:	

Applicant Organisation's Bank:	
Branch:	
Account Number:	
Name of Account:	

<u>or</u> attach a pre-printed deposit slip. (Personal bank accounts are not permitted) Please note: the name of the account must match your organisation's name.

Please keep a copy of this application for your records

Applications are due three weeks prior to the Board meeting at which they are to be considered. Meeting dates are available on our website: www.ilt.co.nz.

Office Use Only		
Date Received:	Grant Number:	
Meeting Date:	Approved / Declined	Amount Approved: \$
Notes:		