

2026/27 Citywide DRF Application Form

Form Preview

Applicant Details

* indicates a required field

Before you start

Ensure you are applying to the correct fund. [Click here](#) to view the fund decision tree.

Please review the [criteria](#) and [terms and conditions](#) relating to this fund before proceeding.

We recommend that you talk to a local or citywide advisor prior to submitting your application.

We STRONGLY advise you submit your application well before the closing date/time so, if necessary, adjustments can be made.

An informal group (unincorporated or without charitable status) can apply but it:

- cannot apply for more than \$2,000
- must have a bank account in its own name

OR can use an umbrella organisation - contact communitygrants@ccc.govt.nz or 03 941 5488 to discuss options.

Applicant

Name of organisation / group completing the project *

Organisation Name

Project Title *

Give us a descriptive title for this project.

Are you using an umbrella organisation for this funding request? *

☐ Yes ☐ No ☐ Don't know ☐ Not Applicable

If you are using an umbrella organisation, once you have submitted your application you will be required to provide information about that group.

Both groups will need to sign this agreement so we know that you both understand your obligations in applying and, if granted, receiving funds.

[Download the Agreement for Umbrella Groups.](#)

If we do not receive a signed umbrella agreement 4 weeks after the fund closing date, **your application will automatically be withdrawn.**

Resolution to apply

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A resolution to apply is required by the project group. The resolution must be on the groups letterhead and signed by two committee members.

You can [download a standard resolution here.](#)

Upload the Signed Resolution

Resolution to apply *

Attach a file:

Two Signatures are required.

Signatories cannot sign for a grant that they directly benefit from (eg, if you are applying for your own wages you cannot sign this resolution).

Resolution Details

Resolution should be on organisation / group letterhead and include:

- Name of organisation
- meeting decision to apply was made to
- that the application was to be to the Christchurch City Council
- how much was to be applied for
- the project or item that the application was to be for.

Eg

It was decided at XYZ Meeting on DATE that the ZXYZ PROJECT GROUP applies for \$X,XXX to the Christchurch City Council Strengthening Communities Fund for ABC PROJECT / XYZ PROEJCT COSTS.

Funding Request Contact

Application Contact *

First Name

Last Name

Application Contact Phone Number *

Must be a New Zealand phone number.

Application Contact Address

Address

Application Contact Email *

Must be an email address.

Organisation details

Physical Address *

Address

Address Line 1 is required.

Phone Number *

Must be a New Zealand phone number.

Website *

Must be a URL.

Postal Address *

Address

Address Line 1 is required.

Email *

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Must be an email address.

Applicant Organisation NZ Charity Registration Number (CRN)

The Charity Registration Number provided will be used to look up the following information. Click Lookup above to check that you have entered the Charity Registration Number correctly.

New Zealand Charities Register Information
Charity Registration Number
Organisation Name
Other Names
Status
Street Address
Postal Address
Telephone
Fax
Email
Website
Date Registered

Must be formatted correctly.

To find your Charity Registration Number (CRN), visit: <https://register.charities.govt.nz/CharitiesRegister/Search>

Please ensure addresses are the physical address of the organisation. If no regular building then the place your activities are most commonly provided.

Incorporated Society / NZBN Number

The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.

New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

Must be formatted correctly.

To find your New Zealand Business Number (NZBN), visit: <https://is-register.companiesoffice.govt.nz/>

Bank Details

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Bank Account - Funds are to be paid into *

Account Name

Account Number

Must be a valid New Zealand bank account format.
xx xxxx xxxxxxxx xxx (do not put in dashes)

If using an umbrella organisation bank details must be for that organisation.

Bank Deposit Slip *

Attach a file:

Funding Request Details

* indicates a required field

Main Project Focus

Is your project primarily *

- ☐ Community
- ☐ Arts
- ☐ Sport and Recreation

Community

Please tick the Strengthening Communities Together Strategic pillars that your project aligns to:

☐ Te Tangata: People We actively promote a culture of equity by valuing diversity and fostering inclusion across communities and generations

☐ Te Whenua: Place We support and help build connections between communities and their places and spaces to foster a sense of local identity, shared experience and stewardship.

☐ Te Mahi: Participation Residents and groups in the wider community are socially and actively engaged and are able to initiate, influence and make decisions that affect their lives.

☐ Te Takatū: Preparedness People feel safe in their communities and neighbourhoods and work together to understand, adapt and thrive in the context of change and disruption.

The Strengthening Communities Together Strategy can be found here: <https://ccc.govt.nz/the-council/plans-strategies-policies-and-bylaws/strategies/strengthening-communities-together-strategy>

Arts

Which arts and creativity strategy pou will your project or organisation deliver to? Please explain how.

☐ Tuakiri - Contribute to city identity

☐ Auaha - Enable innovation and creativity to flourish

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- ☐ Hauora - Contribute to wellbeing outcomes ☐ Kōkiri - Champion the arts in Ōtautahi
Christchurch or Te Pātaka o Rākaihautū

Which Toi Ōtautahi priorities will your project or organisation deliver to?

- ☐ Ngā toi Māori - Strengthen opportunities for rangatai Māori and to experience ngā toi Māori
- ☐ Resource - Create space, employment and contract opportunities within creative sector
- ☐ Create and Encounter - Support or generate opportunities for active participation or experience of arts, creativity and culture
- ☐ Inclusion - Connecting communities and enabling participation and leadership in the arts
- ☐ Connection - Contributes to better understanding of the role of the arts and artists

Sport and Recreation

Which of the Physical Recreation and Sport Strategy priority areas do you think your project fits into?

- ☐ Participation: The citizens of Ōtautahi live physically active lives through participation in recreation, sport and play.
- ☐ Partnership: Quality recreation, sport and play experiences are enabled through partnerships.
- ☐ People: A strong and sustainable sector effectively delivers recreation, sport and play experiences.
- ☐ Places: The citizens of Ōtautahi have access to fit for purpose places and spaces to participate in recreation, sport and play.

Project details

What is your funding request for *

Word count:

Must be no more than 150 words.

Provide a short description of your project - how will this grant support this project?

Select which project sector(s) best describe your project? *

- | | | | |
|--|---|--|---|
| ☐ Community Development | ☐ Disability/Accessibility | ☐ Safety | ☐ Wellbeing |
| ☐ Multicultural | ☐ Older Adults | ☐ Māori | ☐ Equity/Inclusion |
| ☐ Youth | ☐ Environment | ☐ Pacific Peoples | ☐ Social Services |

At least 1 choice and no more than 3 choices may be selected.

Dates

Project Start Date *

Must be a date.

Project End Date

Must be a date.

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Mana Whenua

Council work within Te Hononga, a partnership between the Christchurch City Council and Papatipu Rūnanga (Mana Whenua). As a learning organisation we are interested in what relationships and engagement organisations have with Mana Whenua and will use the information supplied below for reporting on the strength of Te Hononga.

Does your group or organisation have an existing partnership or relationship with mana whenua? *

- ☐ Yes ☐ No ☐ Don't know ☐ Not Applicable

Please give details on the partnership or relationship *

Word count:

Must be no more than 100 words.

Will this project, or the activities funded through this application, involve mana whenua as participants, advisors, or in another capacity? *

- ☐ Yes ☐ No ☐ Don't know ☐ Not Applicable

Comment on mana whenua as participants, advisors, or in another capacity *

Word count:

Must be no more than 100 words.

Climate Change

This fund is not specifically a climate / environmental fund. However, the Council has climate goals it wants to achieve. To allow us to understand how our grant funding contributes to those goals, please answer the questions regarding your project/activities.

Does your project increase in wider community climate literacy and/or preparedness

- ☐ Yes ☐ No

Does the project contribute to reducing climate risk?

- | | |
|--|--|
| ☐ Increase in shade vegetation/structures? | ☐ Local food produced ? |
| ☐ Increase in pervious surfaces? | ☐ Reduction in pest species (flora or fauna)? |
| ☐ Increase in stormwater absorption capacity? | ☐ Reduction in flammable weeds and/or vegetation? |
| ☐ Increase in community understanding of climate change impacts (community education events/surveys)? | ☐ Increase in mulching/plant protection? |
| ☐ Water saved or stored? | ☐ Other: <input type="text"/> |
| ☐ Trees or other vegetation planted? | |

Does the project improve other outcomes (co-benefits)?

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- ☐ Biodiversity restored
- ☐ Soil carbon restored
- ☐ Waste diverted from landfill
- ☐ Water quality improvements

- ☐ Employment/career experience opportunities created
- ☐ Food security
- ☐ Other:

Does the project reduce emissions?

- ☐ Save power
- ☐ Generate renewable energy?
- ☐ Reduce car trips?
- ☐ Reduce use of petrol/diesel equipment?

- ☐ Increase use of electric equipment/electric/hybrid vehicle use?
- ☐ Reduce, reuse, recycle materials, equipment or other?
- ☐ Other:

Outcomes, participation and benefits

* indicates a required field

Collaboration

Are you collaborating with any other groups to provide this project or activity?
Are there other groups doing similar project or activity?

Word count:

Must be no more than 150 words.

Staff/Volunteer information

Number of paid staff *

Must be a number.

Number of volunteers or unpaid staff *

Must be a number.

Number of volunteer hours for this project *

Must be a number.

Participants

How many people will directly benefit from this project *

Must be a number.

How will the participants of the project or activities be better off? *

Word count:

Must be no more than 250 words.

Funding

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If, for any reason, Council does not fund this project—or is only able to contribute partial funding—does your organisation have a contingency plan in place to support the delivery of the project? Please outline.”

Funding Outcomes

What are you going to do?	What change/impact is expected from your activity?	How do you know the activity is needed?	How will you know if you have been successful?
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Must be no more than 40 words.	Must be no more than 40 words.	Must be no more than 40 words.	Must be no more than 40 words.

Budget - for this project

Expenditure for this project

This is a broad overview of your expenses for this project. If you want to include a full project budget, upload it in the supporting documents upload section on the next page.

You cannot apply for your own Salary or Wages. The person making the application must be different from recipient of any potential funding.

Please NOTE: When asked to enter the dollar amount please put in as 1000. There should be no comma's or \$.

[Download a sample budget to help you complete this section.](#)

Cost Description	Category	Total Cost (\$) for the expenditure	How much (\$) you are requesting from Council?	How much in-kind you are requesting' (\$ from others	Upload a quote
-------------------------	-----------------	--	---	---	-----------------------

		Total dollar amount (eg 1000). No comma's or \$) Must be a number.	Must be a number.	Must be a number.	Where relevant

Grant Funding

Unconfirmed funding is funding you have applied for but not, at the time of application, had confirmation of any decision.

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Confirmed funding is money you have received or have been approved for.

All these grants must be for this project. Do NOT include this grant application request amount in the list below.

Date applied	Who have you applied to	How much CONFIRMED funding (\$)	How much UNCONFIRMED funding (\$)	If unconfirmed, expected decision date
Must be a date.	Funder Name	Must be a number.	Must be a number.	Must be a date.

Must be a date.	Funder Name	Must be a number.	Must be a number.	Must be a date.

Other income related to this project

Please enter your income details. In the Amount column the number must be a whole number, no coma's, or dollar signs (eg 1000 not \$1,000).

Include your CONFIRMED grants total in this income list.

In-kind income includes volunteer hours, donated equipment, or discounts to costs (eg reduced venue hire).

Volunteer hours can be calculated by number of hours and equivalent hourly pay rate. Ten volunteers @ 8 hrs per day for 7 days $-(10 \times 8) \times 7 = 560$ with an hourly rate of \$29.90/h (the current living wage) = \$16,744.

Income Detail	Income Category	Income - In Kind Value	Income Amount (\$)
		Must be a number.	Must be a number.

		Must be a number.	Must be a number.

Income Totals

Confirmed grant funding

This number/amount is calculated.

Unconfirmed grant funding

This number/amount is calculated.

Total of other Income

This number/amount is calculated.

Total of In- Kind Donations

This number/amount is calculated.

Council Request Details

The following figures are calculated from the information supplied above. If they are incorrect, you will need to fix the corresponding amounts in the figures above.

Total Requested

This number/amount is calculated.

Total Project Cost

This number/amount is calculated.

Percentage of project requested %

This number/amount is calculated.
%

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Funding - Multiyear

How many additional years funding are you requesting?

☐ 2 ☐ 3

Second Year Funding

Amount Requested Year 2

Must be a dollar amount.

What is the amount (in dollars only) of the total requested funds committed in the second year?

Further details if different to Year 1 request

How does getting additional years funding benefit your organisation?

Third Year Funding

Amount Requested Year 3

Must be a dollar amount.

What is the amount (in dollars only) of the total requested funds committed in the third year?

Further details if different to Year 2 request

Supporting documents

You must attach the following supporting documents:

- Recent bank statement - for the last three months
- Full Project budget (Including items not included in Council Request)
- Annual accounts - please supply the most recent (if older than 12 months also supply a recent financial update)

If applicable to your project also attach:

- Job description - if applying for salary or wages
- Volunteer description - a list of volunteers duties if you are applying for volunteer costs
- Other supporting documents

IMPORTANT NOTES ABOUT ATTACHMENTS:

If you have problems uploading documents, please contact communitygrants@ccc.govt.nz

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Request Information Upload

Attach a file:

Declaration

* indicates a required field

I/we confirm that this application has been approved by the appropriate authorising body of the organisation, and that this has been minuted at an appropriate Board/Committee meeting.

I/we have read and accept the Christchurch City Council's [Grant Terms and Conditions](#).

For the purpose of processing this application and assessing our group's eligibility, we authorise the Council to:

- Collect information about this application, including name, contact information and bank details, and our group, and disclose such information to, third parties; and
- Collect, retain, use and disclose personal information about individuals who are noted in this application. We confirm we have consent to authorise this.

We collect your personal information in order to assess your funding application and any subsequent applications.

We keep the personal information in accordance with the Privacy Act 2020. We hold it safe by storing it with Smartygrants and between servers it is encrypted using HTTPS (TLS 1.3 by default, TLS 1.2 is supported for older browsers).

We only allow authorised Council staff to access this information.

By submitting an application, you consent to council publishing the applicant's name, project description and amount funded on our website. This information may also be used for promoting Christchurch City Council's grant program.

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 incorrect. If you'd like to ask for a copy of your information, or to have it corrected, please contact us at communitygrants@ccc.govt.nz, or phone 03 9415488.

I/we solemnly declare that the details contained in this application are true and correct to the best of our knowledge and we have authority to commit to the above conditions.

*

☐ I/We confirm the above declaration.

Tell us about your experience completing this form

You are now at the end of this form. Before you review your application, we would appreciate if you would please take a few moments to provide some feedback.

Please ensure that you push 'Submit' once the application is completed for the form to be submitted. Late applications will not be considered.

Please indicate how you found the application form:

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☐ Very Easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very Difficult

Did you find the application process useful in helping to understand your own work?

☐ Yes ☐ No

Please provide us with your suggestions about any improvements and/or additions to this form that you think we need to consider:

Any final comments?