

Disability Inclusion Fund 2021-24

APPLICATION FORM

Welcome to the application form for Sport NZ's Disability Inclusion Fund 2021-24. Applications are open from 9:00am Monday 6 September to 12:00pm Monday 18 October 2021.

Prior to commencing your application, we recommend that you carefully read and consult the following resources:

Application Guidelines and Frequently Asked Questions:

<https://sportnz.org.nz/disability-inclusion-fund/>

Sport New Zealand Disability Plan (October 2019):

<https://sportnz.org.nz/media/1526/sport-nz-disability-plan-2019.pdf>

Community Activation – The Three Approaches (Strategy 2020-24):

<https://sportnz.org.nz/resources/three-approaches/>

Active NZ Survey – Spotlight on Disability and Sport New Zealand Disability Review (both December 2018):

<https://sportnz.org.nz/resources/disability-review/>

Application Form Contents

DISABILITY INCLUSION FUND 2021-24

There are eight sections in this form for you to complete:

Section 1 - Eligibility Information

Section 2 - Applicant Information

Section 3 - Request for Investment

Section 4 - Proposal Overview

Section 5 - Proposal Assessment

Section 6 - Proposal Delivery

Section 7 - Payment Information

Section 8 - Acknowledgements

Each section starts on a new page. You may save the form and continue later at any stage.

You should have copies of the following documents ready to upload at the appropriate section:

- Section 5 - Any other supporting information for proposal assessment (for example, audio or video files, if applicable)
- Section 6 - Initiative plan (in PDF format)
- Section 6 - Initiative budget (in Excel format)
- Section 7 - Bank statement

Please press 'Next' to start your application.

Eligibility Information

SECTION 1

Q1. What type of organisation is your organisation? *

☐

National organisation

☐

Regional organisation

Q2. What is your organisation's main purpose? *

☐

Play

☐

Active Recreation

☐

Sport

☐

Play, Active Recreation and Sport

☐

Q3. Can the majority of your organisation's mahi in play, active recreation or sport be described as disability-specific or non-disability specific? *

☐

Disability-specific

☐

Non-disability-specific

Q4. Does your organisation have experience in: *

- ☐ providing access to, or delivering, proven quality and equitable participation opportunities of their choice for disabled tamariki and/or rangatahi
- ☐ working with disabled tamariki and/or rangatahi with intellectual and/or invisible impairments
- ☐ developing new and innovative opportunities for using play, active recreation and sport to engage with disabled tamariki and/or rangatahi
- ☐ none of the above - we wish to explore new and innovative opportunities for using play, active recreation and sport to engage with disabled tamariki and/or rangatahi

Q5. Is your organisation submitting this application individually (sole applicant), or collectively (as the lead applicant in a joint proposal with other organisations)? *

☐

Individually (sole applicant)

☐

Collectively (lead applicant on behalf of one other organisation)

☐

Collectively (lead applicant on behalf of two or more other other organisations)

Q6. If your organisation is the lead applicant in a joint proposal, please list the name/s of the other organisations involved in this joint proposal whom you are applying on behalf of.

Please separate the names with a comma ","

Q7. If your organisation's application is successful, a requirement of being granted investment will be the engagement and collaboration of your organisation with other appropriate/specialist organisations to support your proposed initiatives. Please list the name/s of the organisations who you propose to engage with and/or whose work will be affected by your proposed initiatives. *

Please separate the names with a comma ","

Applicant Information

SECTION 2

Q8. Organisation name *

Q9. Organisation address *

Street Address Line 1

Street Address Line 2

Suburb / Town

City / Province

Post Code

Q10. What is the legal status of your organisation? *

☐

Charitable Trust

☐

Incorporated Society

☐

Registered Charity

☐

Q11. What is your organisation's Incorporated Society Number or New Zealand Business Number (NZBN)?

We will confirm this at <https://www.nzbn.govt.nz/>

Q12. Is your organisation registered for GST? *

☐

Yes

☐

No

Q13. What is your organisation's GST number?

Type numbers only 000-000-000

Q14. Primary contact name *

First Name

Last Name

Q15. Primary contact role *

Q16. Primary contact email *

example@example.com

Q17. Primary contact phone *

Area or Cell Code

Landline or Cell Number

Request for Investment

SECTION 3

Q18. Please state the period for which you are requesting investment? *

☐

One year 2021/22

☐

One year 2022/23

☐

Two years 2021/22 and 2022/23

☐

Two years 2022/23 and 2023/24

☐

Three years 2021/22 to 2023/24

Q19. What is the total amount of investment (GST exclusive) which you are requesting? *

Type numbers only

Proposal Overview

SECTION 4

Q20. Initiative name *

Q21. Initiative manager's name *

First Name

Last Name

Q22. Proposed start-date *

Day

Month

Year



Q23. Proposed end-date *

Day

Month

Year



Q24. Budgeted total cost (GST exclusive) *

Amount to be funded from all sources of income including amount requested from Sport NZ at Q19

Q25. Proposed location/s - please detail where your activities will take place *

Please separate location names with a comma ","

Q26. Proposed initiative/s - please detail what you will do *

Proposal Assessment

SECTION 5

DISABILITY LEADERSHIP

Q27. Please provide evidence of your organisation's leadership (and/or potential to lead) in the disability space. *

Refer to the Guidelines to help you answer this question

PROPOSAL IMPACT

Q28. Please identify the target audience for your proposed initiative/s. Will the initiative/s aim to impact disabled tamariki and/or rangatahi who have: *

- ☐ Intellectual impairments
- ☐ Invisible impairments
- ☐ Physical impairments
- ☐ Lower levels of physical activity (than those already participating)
- ☐ Fewer opportunities to participate (than those already participating)
- ☐ Are less interested in existing opportunities (than those already participating)
- ☐ Are less able to access existing opportunities (than those already participating)

Q29. Please describe how your proposed initiative/s will engage with the target audience. *

Refer to the Guidelines to help you answer this question

PROPOSAL LEGACY

Q30. Please provide detail of how the proposed initiative/s will create sustainable change within your organisation's networks and/or across the play, active recreation and sport sector. *

Refer to the Guidelines to help you answer this question

PROPOSAL ALIGNMENT

Q31. Please provide detail of how the proposed initiative/s will align with Sport NZ's strategy. *

Refer to the Guidelines to help you answer this question

SUPPORTING INFORMATION

Q32. If relevant, please attach files to support your answers to Section 5.

Drag and drop files here

Refer to the Guidelines to help you answer this question

Proposal Delivery

SECTION 6

CAPACITY AND CAPABILITY

Q33. Please provide evidence of your organisation's experience, capacity and capability to deliver the proposed initiative/s. *

Refer to the Guidelines to help you answer this question

INITIATIVE PLAN

Q34. Please upload your initiative plan (in PDF format) *

Drag and drop files here

Refer to the Guidelines to help you answer this question

INITIATIVE BUDGET

Q35. Please upload your initiative budget (in Excel format) *

Drag and drop files here

Refer to the Guidelines to help you answer this question

Payment Information

SECTION 7

Q36. Bank account number *

Type numbers only 00-0000-00000000-000

Q37. Bank account name *

Acknowledgements

SECTION 8

Q39. I confirm that I am authorised to submit this application on behalf of our organisation, and that our organisation's directors and/or trustees and/or treasurer are aware of and support this submission. *

☐

Yes

☐

No

Q40. I authorise my contact details to be added to Sport NZ's database for relevant correspondence, including disability sector information (Note: your answer will have no impact on the assessment of your application) *

☐

Yes

☐

No

Q41. I confirm that information in this application is accurate and correct to the best of my knowledge at the time of application. *

☐

Yes

☐

No

Q42. I acknowledge that if this application is deemed successful in being granted investment, our organisation will sign an Investment Schedule with Sport NZ outlining the agreed initiative/s to be implemented, and that any investment that our organisation is granted will be used as proposed in our application form and/or as specified in the Investment Schedule. *

☐

Yes

☐

No

Q43. I acknowledge that Sport NZ has the right to audit the information provided in this application and the use of any investment granted. I will provide full cooperation in the event of such an audit being undertaken. *

☐

Yes

☐

No

Q44. I confirm that I have read and understand the section entitled "Protecting your information" in the "Disability Inclusion Fund Guidelines". I authorise Sport NZ to make such enquiries as it deems fit in considering the application (including banking details) and I accept and agree that details of any investment granted to our organisation may be made public. *

☐

Yes

☐

No

Submit