

# Apply for the Teu le Va - Dawn Raids History Community Fund Round Two

This application form is for the Teu le Va - Dawn Raids History Community Fund Round Two.

Make sure you submit the completed form and supporting documents to <a href="mailto:fundhelp@mpp.govt.nz">fundhelp@mpp.govt.nz</a> by 5pm, Friday, 24 February 2023.

A downloadable initiative budget template that you will need to include with your application form can be found here:

[Download MS Word format] | [Download PDF format]

Before starting, we recommend you read through the <u>fund information</u> and the <u>frequently asked questions</u> on the Teu le Va – Dawn Raids History Community Fund Round Two webpage.

## Your details 1. Full name\* 2. Your email address\* 3. Contact phone number\* 4. Residential address\* 5. Which region are you located in?\* (choose one) ☐ Bay of Plenty ☐ Taranaki ☐ Tasman □ Northland ☐ Gisborne □ Auckland ☐ Manawatū-☐ Nelson Whanganui ☐ Waikato ☐ Wellington ☐ Marlborough ☐ Hawke's Bay ☐ West Coast ☐ Canterbury ☐ Otago ☐ Southland



-	ealand citizen or perma gible for funding)	anent resident?" (only wa	z citizens or permanent
☐ Yes ☐ No			
7. What ethnic grou	ups do you identify wit	h?* (choose all that appl	y)
☐ Cook Islands	☐ Fijian	☐ Kiribati	☐ Niuean
Māori □ NZ European □ Tongan	☐ Rotuman ☐ Tuvaluan	<ul><li>☐ Samoan</li><li>☐ Other</li></ul>	☐ Tokelauan
8. If you answered	OTHER to the previous	question, please specify	:
Secondary cont 9. Full name*	act details		
9. Full name			
10. Email address*			
11. Contact phone no	umber*		
Marketing			
12. How did you hea	r about the Teu le Va F	und?* (choose one)	
☐ MPP website	☐ Social media	☐ Fetu Pasifika newsletter	☐ Word of mouth
☐ MPP event	☐ Other		
13. If you answered	OTHER to the previous	question, please specify	:



## Organisation/group details

If you are representing an organisation or group, please fill out the questions in this section:

14. Name of organisation/group				
15. Organisation/group	type (choose one)			
☐ Church/religious group	☐ Disability related group	☐ Ethnic-specific group	☐ NGO/not-for- profit organisation	
☐ Community group	☐ Other			
16. GST number (if app	licable)			
17. Your role in organis	ation/group			
18. Which region is you	r organisation/group p	rimarily located in? (ch	oose one)	
☐ Northland	☐ Bay of Plenty	☐ Taranaki	☐ Tasman	
☐ Auckland	☐ Gisborne	□ Manawatū- Whanganui	□ Nelson	
☐ Waikato	☐ Hawke's Bay	☐ Wellington	☐ Marlborough	
☐ West Coast	☐ Canterbury	☐ Otago	☐ Southland	
19. What is the ethnic a	affiliation of your organ	isation/group? (choose	e all that apply)	
☐ Cook Islands Māori	☐ Fijian	☐ Kiribati	☐ Niuean	
<ul><li>□ NZ European</li><li>□ Tongan</li></ul>	<ul><li>☐ Rotuman</li><li>☐ Tuvaluan</li></ul>	<ul><li>☐ Samoan</li><li>☐ Other</li></ul>	☐ Tokelauan	
20. If you answered OT	HER to the previous qu	estion, please specify:		



21. Is your organisation/group majority Pacific owned or operated? (at least 50%)  ☐ Yes ☐ No					
22. Please provide links to your organisation/group's website or social media channels (if applicable)					
23. Has your organisation/group received funding from the Ministry for Pacific Peoples before?					
□ Yes □ No					
24. If you answered YES to the previous question, please specify:					



## **Initiative details**

25. What type of ini	tiative will the funding b	e used for?* (choose all	that apply)
☐ Written	☐ Visual	☐ Paintings	☐ Digital
☐ Oral	☐ Dance or performing arts	☐ Exhibitions	☐ Music
☐ Audio	☐ Sculptures	☐ Moving image	☐ Other
26. If you answered	OTHER to the previous of	question, please specify:	
27. Name of your in	itiative:*		
29 What region/s w	vill your initiative be deli	uarad in2* (chaoca all th	ant annly)
□ Northland	☐ Bay of Plenty	Taranaki	☐ Tasman
☐ Auckland	□ Gisborne	□ Manawatū- Whanganui	□ Nelson
☐ Waikato	☐ Hawke's Bay	☐ Wellington	☐ Marlborough
☐ West Coast	☐ Canterbury	□ Otago	☐ Southland



### 29. Describe your initiative\*

Outline your plan, what your goals are and how you will achieve them, what the outcomes will be, who will be involved, and what their roles will be. (1000 words max)						



### 30. Describe how your initiative will\*:

- be ready or near ready to commence upon receiving funding
- work with people and/or communities that were directly impacted by the Dawn Raids
- work with people who had their homes raided and/or were stopped on the street and asked to produce their passport or permit during the Dawn Raids period
- work with, or be led by, Pacific persons or Pacific community groups directly impacted by the Dawn Raids.

Initiatives that demonstrate the above will be preferred. (500 words max)				



## **31.** Describe how your initiative will contribute to any or all of the fund objectives\* The fund objectives are to:

- allow for a healing process, through storytelling, for those impacted by the Dawn Raids
- raise awareness of racism and discrimination in New Zealand
- increase understanding and appreciation of the history of Pacific communities in New Zealand
- inform educational resources about the Dawn Raids
- ensure Pacific languages, cultures, and identities in New Zealand thrive.

(500 words max)				



### 32. Do you intend to store and preserve your initiative?\*

Examples of archival storage settings include:

Donating a copy of a physical or digital initiative to libraries like the Alexander Turnbull Library, regional libraries, or museums.
 Storing an initiative within a community archive.

	□ Yes □ No
33.	If you answered YES to the previous question, please specify:
34.	If you are successful in receiving funding, do you consent to the Ministry publishing a record of your initiative on an online platform (if applicable)?
	□ Yes □ No
35.	If you are successful in receiving funding, do you consent to your name or the name of your organisation and a summary of your initiative being published on the Ministry website?*
	□ Yes □ No
36.	If you are successful in receiving funding, do you consent to your name or the name of your organisation and details of your initiative being published on the Ministry's social media channels?*
	□ Yes □ No
37.	Expected start date of your project / initiative* (dd/mm/yyyy)
38.	Expected end date of your project / initiative* (dd/mm/yyyy)
39.	What is the funding amount you are requesting?* (Must be no more than \$50,000 excl. GST)



40. Have you or your organisation completed similar initiatives or projects in the past?*				
☐ Yes ☐ No				
41. If you answered YES to the previous question, please specify:				
42. Is there anything else you'd like to tell us that is relevant to your application?				
43. If your application is unsuccessful, do you consent for your information to be referred to another suitable fund?*				
☐ Yes ☐ No				



### **Supporting documents**

Your funding application will need to include the following two items of supporting documentation:

1) An initiative budget for the total funding amount requested, uploaded below using the initiative budget template provided.

The initiative Budget template can be found here, or on the fund's application webpage: [Download MS Word format] | [Download PDF format]

2) A bank statement in the name of the individual, organisation or group applying for funding, emailed through to <a href="mailto:fundhelp@mpp.govt.nz">fundhelp@mpp.govt.nz</a> along with your application. Your bank statement must show the bank name and logo, the bank account number and bank account holder's name.

If the account is not in the name of the primary contact or group / organisation receiving funding, please also provide a letter to <a href="mailto:fundhelp@mpp.govt.nz">fundhelp@mpp.govt.nz</a> from all parties agreeing to the account being used.

Please email this supporting documentation through, and any other relevant support material you may wish to include, with your application.

IMPORTANT: You'll be required to provide all supporting documents before we can process your application.

### **Application checklist**

Before submitting your application, please check you have:\*

Completed all sections of this form
Completed and attached your initiative budget to your email to <a href="mailto:fundhelp@mpp.govt.nz">fundhelp@mpp.govt.nz</a>
Attached any other relevant support material needed to strengthen your application to your email to $\frac{fundhelp@mpp.govt.nz}{fundhelp@mpp.govt.nz}$
Attached your bank statement to your email to <a href="mailto:fundhelp@mpp.govt.nz">fundhelp@mpp.govt.nz</a>

Please make sure any documents emailed are saved in .doc, .docx, .jpg, .png or PDF file format ONLY and please include your full name or organisation name in the filename before attaching. This will help us match up your documents with your application form. Please also make sure any attachments are no larger than 4MB each in file size.



### **Declaration**

#### In signing this Declaration, I:

- 1. Confirm that if successful, I/we will not use funding for activities outlined in the What's Not Funded section of the FAQs.
- 2. Confirm that I am authorised to act on behalf of my organisation (if applicable).
- 3. Confirm that I am a citizen or permanent resident of New Zealand.
- 4. Will notify the Ministry for Pacific Peoples at the time of my application submission if I have received funding for the same or similar proposal.
- 5. Confirm the information contained in this application is true and accurate to the best of my knowledge.
- 6. Confirm that any funding received will be used solely for the purpose outlined in this application.
- 7. Agree to fulfil the requirements as outlined in this form to the best of my/our abilities.
- 8. Understand there is no guarantee that this application will be successful in securing any funding from the Ministry for Pacific Peoples.
- 9. Agree to supply the Ministry for Pacific Peoples with a scanned copy or screenshot of the bank account number that funds will be deposited into, should this application be successful.
- 10. Agree to follow Government COVID-19 health measures for gatherings and social distancing when required.
- 11. Agree that information provided in this application may be used by the Ministry for Pacific Peoples for statistical purposes and/or policy development.
- 12. Agree to provide monthly updates, a six-month progress report, and a final accountability report outlining usage of the funds, should this application be successful.

I agree:*			
☐ Yes ☐ No			
Applicant name*			
Role in your organisation	on (if applicable)		
Signature*			