**Apply for the Pacific Aotearoa Community Outreach - Social Enterprise Fund**

This application form is for the [Pacific Aotearoa Community Outreach - Social Enterprise Fund.](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/)

The Fund has been established to provide direct capital investment for Pacific social enterprises to respond to current needs to create wealth opportunities and improve social wellbeing for Pacific families in the New Zealand economy. Applicants can apply by submitting a costed proposal up to $50,000, exclusive of GST.

Before starting, please make sure you have read and understood the [application process](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/), prepared your supporting material and completed the [self-assessment tool](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/self-assessment/). We also recommend you check our [FAQs about the Fund](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/faqs/), especially the eligibility criteria.

Any questions about this form or the application process can be directed to [fundhelp@mpp.govt.nz](mailto:fundhelp@mpp.govt.nz).

**PRIMARY APPLICANT DETAILS**

1. **Title / Cultural title / Matai (if relevant)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **First Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Last Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Your email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Street address** (please include city and postcode):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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6. **Full business / organisation name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. **Your role at the business**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. **Contact phone number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. **Are you of Pacific descent?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

1. **Which of the following ethnic groups do you identify with?** (Select all that apply):

|  |  |  |
| --- | --- | --- |
| 🞏 Cook Islands Māori | 🞏 Fijian | 🞏 I-Kiribati |
| 🞏 Māori | 🞏 Niuean | 🞏 Ni-Vanuatu |
| 🞏 NZ European | 🞏 Papua New Guinean | 🞏 Rotuman |
| 🞏 Samoan | 🞏 Solomon Islander | 🞏 Tahitian |
| 🞏 Tokelauan | 🞏 Tongan | 🞏 Tuvaluan |
| 🞏 Other ethnic identities |  |  |

**SECONDARY APPLICANT DETAILS**

*You must supply secondary applicant contact details as a back-up in case we can’t contact the primary applicant.*

1. **Title / Cultural title / Matai (if relevant)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **First Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Last Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Your email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Street address** (please include city and postcode):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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6. **Your role at the business**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. **Contact phone number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ELIGIBILITY CHECK**

The following questions will determine your organisation's eligibility to apply for the Pacific Aotearoa Community Outreach - Social Enterprise Fund, so please answer as honestly as you can.

1. **Is your business registered as a NZ Company?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

**If you answered YES to the previous question, what is your New Zealand business number / company number?** For help, go to <https://www.nzbn.govt.nz>.   
  
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1. **If you answered NO to the previous question, is your organisation registered as a Charitable Trust?** For help, go to <https://www.charities.govt.nz>.

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

**If you answered YES to question 19, what is your charitable trust number?** For help, go to <https://www.charities.govt.nz>.

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1. **Will you be using this funding to support a commercial business or revenue generating initiative?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

1. **Is your business at least 50% Pacific Owned?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

1. **Will your proposed initiative for funding commence on or after 1 April 2023?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

**If you answered NO to any of the questions 20 - 23, you may not be eligible for funding. However, if you wish to continue, your application will be assessed by the term to determine your eligibility.**

**SELF-ASSESSMENT RESULTS**

The following section requires you to have completed the [Self-assessment tool](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/self-assessment/) (Step 1) before proceeding. This self-assessment will guide you on the funding amount you are eligible to apply for. However, the Ministry will review your self-assessment based on all the information you provide with your application to ensure you are applying for the correct funding option.

1. **Based on your self-assessment results, which of the four Social Enterprise phases best fits your organisation?** (choose one):

|  |
| --- |
| 🞏 Phase 1: Start-up (You can apply for up to $5,000 excluding GST) |
| 🞏 Phase 2: Emerging (You can apply for up to $10,000 excluding GST) |
| 🞏 Phase 3: Growth (You can apply for up to $20,000 excluding GST) |
| 🞏 Phase 4: Established (You can apply for up to $50,000 excluding GST) |

**BUSINESS / ORGANISATION DETAILS**

1. **What is your business / organisation type?** (choose one):

|  |  |  |
| --- | --- | --- |
| 🞏 Church / religious group | 🞏 Social services provider | 🞏 NGO |
| 🞏 Ethnic specific group | 🞏 Arts, Languages and Culture Group | 🞏 LGBTQI |
| 🞏 Sporting Group | 🞏 Other Community Groups | 🞏 Disability related |
| 🞏 Youth provider | 🞏 Other |  |

1. **Which region is your business based in?** (choose one)

|  |  |  |
| --- | --- | --- |
| 🞏 Northland | 🞏 Auckland | 🞏 Waikato |
| 🞏 Bay of Plenty | 🞏 Gisborne | 🞏 Hawkes Bay |
| 🞏 Taranaki | 🞏 Manawatu-Whanganui | 🞏 Wellington |
| 🞏 Nelson | 🞏 Tasman | 🞏 Marlborough |
| 🞏 West Coast | 🞏 Canterbury | 🞏 Otago |
| 🞏 Southland | 🞏 National |  |

1. **What is the physical address of your business?** (please include street address, city and postcode)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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2. **Postal address** (if different to above):   
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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3. **GST number** (if applicable)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **When did the business start operation?** (dd/mm/yyyy)**:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Business phone number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. **Website and social media links** (if applicable):   
     
   ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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1. **Which of the following ethnic groups does your business / organisation work with or provide services for?** (Select all that apply):

|  |  |  |
| --- | --- | --- |
| 🞏 Cook Islands Māori | 🞏 Fijian | 🞏 I-Kiribati |
| 🞏 Māori | 🞏 Niuean | 🞏 Ni-Vanuatu |
| 🞏 NZ European | 🞏 Papua New Guinean | 🞏 Rotuman |
| 🞏 Samoan | 🞏 Solomon Islander | 🞏 Tahitian |
| 🞏 Tokelauan | 🞏 Tongan | 🞏 Tuvaluan |
| 🞏 Other ethnic identities |  |  |

**ABOUT YOUR BUSINESS / ORGANISATION**

This section will help indicate your business maturity and ability to deliver your proposed initiative effectively. Please respond concisely to the questions and provide website links, if available, for further reference.

1. **Please provide background about your business / organisation.** Include information about the establishment, vision, mission and strategic priorities, core services and coverage of your business / organisation (max 500 words):  
     
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1. **Please provide information about the governance structure of your business / organisation.** Please include profiles of your governing members and information about the stability of your organisation. (max 500 words):  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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1. **Please provide information about the priority areas of delivery or focus for your business / organisation.** Please include your key services, outcomes you want to achieve and how you plan to achieve them. (max 500 words):  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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**FINANCIAL INFORMATION**

*Following your application submission, if your business/organisation is eligible for further assessment, you may also be asked to provide the following financial documentation:*

* *Balance Sheet Statement for two consecutive periods [01 April 2021 - 31 March 2022 and 01 April 2020 - 31 March 2021]*
* *Profit and Loss Statement for two consecutive periods [01 April 2021 - 31 March 2022 and 01 April 2020 - 31 March 2021]*
* *Cashflow Statement*
* *Budget for the current financial year*

**If this information is required, we will request via email. Please DO NOT email this information with this form.**

However, it could be useful to prepare the above documentation ahead of time, to expedite the assessment process if and when it is requested via email.

**ABOUT YOUR PROPOSED CAPITAL INVESTMENT PROJECT OR INITIATIVE**

This section will help us understand your proposed capital investment initiative, the purpose and objectives and how you will use the funding effectively to deliver it. How your initiative contributes to the objectives of the Pacific Aotearoa Community Outreach Fund will be key, so please familiarise yourself with these before completing.

Please respond concisely to the questions and provide website links, if available, for further reference.

1. **What is the funding amount you are requesting, based on the maximum limit for the phase you have self-assessed your business as being in?** (MPP will confirm this is the correct phase based on the details you provide with your application.)

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1. **Anticipated start date of your initiative?** It must start on or after 1 April 2023.(dd/mm/yyyy)**:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Anticipated end date of your initiative?** It must end no later than 31 March 2024.(dd/mm/yyyy)**:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **What is the name of your initiative?**  
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4. **Please describe your initiative.** Outline the purpose/objectives of the capital investment initiative, what do you want to achieve, why the initiative is important and what do you need to achieve at the end of the project (outcomes)(500 words max):  
     
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1. **How do you plan to achieve the intended results / outcomes of the initiative?** Elaborate on the deliverables you will perform to achieve the results/outcomes you want(500 words max):  
     
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1. **How will your initiative contribute to improved social and economic wealth and wellbeing of the organisation or target community?** Specify the contribution that the capital investment initiative will make to your organisation/initiative which will affect positive social and economic changes to the wealth and wellbeing of the organisation/target community. (500 words max):  
     
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1. **How will your organisation ensure that your initiative will succeed long-term and funding be re-invested back into the community?** Look ahead, outline how you will measure the success and sustainability of your organisation/initiative e.g. in 2025, where would you see your organisation/initiative? What plan/steps will your organisation/initiative take to ensure its success? (500 words max):  
     
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1. **How will the funding help your organisation create employment pathways for Pacific peoples?** Include expected number and type of specific jobs/roles; whether roles are temporary or permanent; whether minimum living wage will be offered; how the fund will support opportunities for current employees. (500 words max):  
     
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1. **Identifying risks is an important aspect of project planning. Describe any possible risks (operational, programmatic, environmental, financial) associated with your initiative, and how you will mitigate/manage them?** Risk example: "If unforeseen events mean we are unable to complete the project within required timeframes, we will inform and work with the Ministry to agree new timeframes." (500 words max):  
     
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**BACKGROUND INFORMATION**

1. **How did you hear about the Pacific Aotearoa Community Outreach - Social Enterprise Fund?** (choose one):

|  |  |  |
| --- | --- | --- |
| 🞏 MPP website | 🞏 Social media | 🞏 Email |
| 🞏 Colleague | 🞏 MPP staff | 🞏 MPP event |
| 🞏 Friend / word of mouth | 🞏 Other |  |

1. **Have you received funding from the Ministry for Pacific Peoples before?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

**If you answered YES to the previous question, please specify below** (I have received funding from MPP for the following projects, on these dates and in these amounts)**:**   
  
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1. **Have you received funding from other agencies for this project / initiative?**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

**If you answered YES to the previous question, please specify below** (I have received funding from other agencies for the following projects, on these dates and in these amounts)**:**   
  
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1. **Is there anything else you’d like to tell us that is relevant to your application? If so, please give details:** (500 words max):  
     
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**SUPPORTING DOCUMENTS AND INFORMATION**

*Your funding application will need to include the following supporting documentation and information:*

1. **A detailed funding proposal document** - showing how you will use the funding to achieve the outcomes of your capital investment initiative.

Download and complete the following Funding Proposal Template (in either PDF or MS Word format):

Funding Proposal Template: [MS Word format](https://www.mpp.govt.nz/assets/Funding/PACO-3/Word-PACO3-Funding-Proposal-Template-INSERT-BUSINESS-NAME.docx) | [PDF format](https://www.mpp.govt.nz/assets/Funding/PACO-3/PDF-PACO3-Funding-Proposal-Template-INSERT-BUSINESS-NAME.pdf)   
  
**Please prepare supporting this as a separate document.** You’ll be required to email this document together with this completed form in order to complete your application. For more information, please see instructions at the end of this form and [our FAQs](https://www.mpp.govt.nz/funding/paco-social-enterprise-fund/faqs/).

1. **Contact details for a referee** – this should be an independent person who knows the primary/secondary applicants and is familiar with the business or organisation applying for this funding. Your referee cannot be a family member. Please include name, email address, contact phone number, and their relationship to you and your business:  
     
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**APPLICATION CHECKLIST**

*Before saving and submitting this form, please check you have:*

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| --- |
| 🞏 Completed all required questions, especially the eligibility check and self-assessment sections |
| 🞏 Prepared your Funding Proposal, using the template provided |
| 🞏 Provided contact details for a referee |
| 🞏 Read and agreed to the Declaration below |

**Applicant Declaration**

In digitally signing this Declaration, I:

* Confirm the information contained is true and accurate.
* Confirm I have read and understood my rights regarding the Privacy Act 2020.
* Confirm this initiative complies with the objectives of my organisation.
* Understand that there is no guarantee that my organisation will be successful in securing any funding from the Ministry for Pacific Peoples.
* Agree that the Ministry for Pacific Peoples may collect information about my organisation from any third party in respect of this application.
* Agree that, if the application is successful, the name of my organisation, purpose of investment and the amount of the Ministry for Pacific Peoples’ investment will be available as part of the Ministry for Pacific Peoples’ accountability for public funds.
* Agree that the information provided in this application can be used by the Ministry for Pacific Peoples for statistical purposes and/or policy development.
* Agree that, if successful, my organisation may be required, along with the targeted beneficiaries of the proposed project, to participate in an evaluation of the initiative.
* Confirm that I have informed my referee that a copy of their reference will be stored at the Ministry for Pacific Peoples.
* Accept full accountability and responsibility for all requirements associated with the completion of the initiative.
* Understand that the personal information I am being asked to provide is necessary to help determine how the Ministry for Pacific Peoples might be able to assist me with my funding aspirations, including eligibility for practical and financial assistance. It will be held by the Ministry for Pacific Peoples PO Box 833 Wellington 6140, the government agency that administers the funding grant. I understand I have the right to request access to MY personal information held by the Ministry for Pacific Peoples and, if appropriate, request that the information be corrected.

**I agree:**

|  |  |
| --- | --- |
| 🞏 Yes | 🞏 No |

1. **Full Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Role in your business / organisation**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
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**How to submit this application for funding**

Please complete, save and email this form to [fundhelp@mpp.govt.nz](mailto:fundhelp@mpp.govt.nz), attaching your *supporting document #1* (as a separate document).

**IMPORTANT: Before emailing, please make sure your documents are only saved in either .doc, .docx, xls, xlsx or .pdf file format and use “PACO 3 [YOUR BUSINESS NAME]” somewhere in the filenames when saving.** This will assist our team to match your uploads with your application.

Following your submission, you should receive an email confirming receipt of your application. If you haven’t received a confirmation email within 24 hours, please email [fundhelp@mpp.govt.nz](mailto:fundhelp@mpp.govt.nz),

**Questions?**   
Send questions about your application to: [fundhelp@mpp.govt.nz](mailto:fundhelp@mpp.govt.nz).