

Sponsorship and Donation Application

OceanaGold is pleased to be able to support groups in our community through in-kind assistance or a donation. These notes are designed to assist you as you complete the application form. The more we know, the easier it is for us to process your request.

Things you should know:

- Please check the donation criteria on our website before applying.
- Applications can only be submitted using this form. Additional information can be attached.
- Applications are accepted at any time by our Macraes Funding Committee. Please note it may take up to two months to process your application.
- A committee will consider the application against a set of criteria. OceanaGold's purpose is to "Produce superior results that leave a positive legacy every day" and part of that is ensuring neighbouring* communities are healthy, vibrant and self-sustaining.

OceanaGold prioritises funding towards projects that support: **Community / Education / Health**

- Our decision on your application will be given to you either verbally in the first instance, or in writing.
- Only one donation over \$500 will be paid to any Organisation during a single financial year (ending 31 December).
- If you have any questions about your application, please don't hesitate to email: macraes.contributions@ocenagold.com

How will you acknowledge OceanaGold Macraes?

We would like to know how our assistance will be acknowledged. Here are some possibilities.

- Place the OceanaGold logo on uniforms, equipment, advertising or paperwork. We can provide you with a logo by email.
- Erect signage or borrow some of our core flute signs.
- Mention us in your newsletter or website.
- Acknowledge us at your AGM, prize giving or local newspaper article.

To allow us to consider your application and process it in a timely manner we need some information about who you are, how we contact you, what the funds will be used for, and how you would acknowledge any assistance we may provide. Please give us as much detail as possible, and make sure you fill in the complete form.

Incomplete forms will not be considered.

**Neighbouring community areas are defined as: Middlemarch, Hyde, Macraes, Dunback, Palmerston, Waikouaiti and Karitane. Exemptions will be considered for requests from Warrington and Waitati.*

Your Organisation's Details

1. Name of Organisation:

2. Postal Address:

For correspondence

Of the Organisation

Street / PO Box:

Street / PO Box:

Suburb:

Suburb:

Town/City:

Town/City:

Postal Code:

Postal Code:

3. Contact Number:

Landline:

Mobile:

4. Contact Person:

First Name:

Last Name:

5. Role/Position in Organisation:

President / Chairman

Secretary / Coordinator

Funding Administrator

Principle

Other:

6. Organisation Details:

Website:

Facebook page:

Contact Email Address:

About Your Organisation

7. Type of Organisation:

OUR VALUES: RESPECT | ONE TEAM | CONTRIBUTE | KNOWLEDGE

(Charitable Trust*, Non-Profit Body, Education Facility, Sports Club, Community Group etc.)

*If applicable, what is your Charities Commission Number?

Please provide a copy of your Charities Commission Certificate.

8. Is your Organisation GST registered?

NO / YES (circle/select one)

(If yes, please do not include GST in the costings)

9. Explain the aims of your organisation:

If you have a Trust Deed, please attach a copy.

10. How many employees are involved in your Organisation?

11. How many volunteers are involved in your Organisation?

12. If you have volunteers are any of them paid?

NO / YES (circle/select one)

13. How many members are involved in your Organisation?

14. Is there a membership fee?

NO / YES (circle/select one)

If yes, how much yearly? \$

15. If you are representing a school, what is the present roll number?

OUR VALUES: RESPECT | ONE TEAM | CONTRIBUTE | KNOWLEDGE

16. What is your school decile?

17. How many students have a parent/guardian directly employed by OceanaGold?

Funding Application Details

18. Total monetary amount this funding application is for:

Please do not include GST in your amounts unless it is provided on a quote.

\$

Note: Two quotes will be required if funding request is over \$500.

19. Explain what the funding is to be used for a when it will be used? Explain what difference this project/activity will make to your Organisation?

Attach additional information if required.

20. Explain what outcomes your Organisation is expecting from this funding?

Attach additional information if required.

21. What is the total cost of the activity/project?

\$

22. What is the total amount of funds your Organisation has raised to-date?

\$

23. Have you or the Organisation community/group or school applied for funds elsewhere?

NO / YES (circle/select one)

If yes:

Organisation applied to:	Amount:	Outcome (was funding given?)
_____	_____	_____
_____	_____	_____
_____	_____	_____

24. What is the shortfall?

25. How will you raise the present shortfall?

26. Does your Organisation have reserve funds?

NO / YES (circle/select one)

If yes, please explain why they cannot be used for this project/activity?

27. Has the Organisation applied for funds from OceanaGold before?

NO / YES (circle/select one)

28. Has the Organisation been successful in their application?

NO / YES (circle/select one)

If yes, please fill in the details of the funds below:

Year: Amount \$: Activity/Project:

Year: Amount \$: Activity/Project:

Year: Amount \$: Activity/Project:

29. If appropriate, please provide any evidence of community need and support for the project/activity.

30. Does your Organisation receive funds from local or central government?

NO / YES (circle/select one)

If yes, please specify yearly amount received and how it is utilised.

31. Please attach present financial statement/balance of accounts.

32. If successful, the donation will be paid into your Organisation's bank account by direct debit. If we already have your bank account details, mark N/A.

Account Name:

Account Number:

Attach a pre-printed deposit slip or a statement copy of the bank verified account number. If your funding application is successful, a remittance slip confirming payment will be emailed to the address provided in 'Your Organisation's Details' section.

Funding Application Details

- We confirm that this application has the formal approval of our controlling Board/Committee
- To the best of our knowledge the information provided in this application is true and correct

- We accept that details of any donation that the OceanaGold makes may be made public
- We acknowledge that any decision made by the OceanaGold is final
- We accept that our Organisation, community/group or school will be accountable for any donation made, which will be used for the purposes specified in the application or as directed by OceanaGold
- We acknowledge and agree that any photography/videography requested by OceanaGold in connection with a donation may be used by internally and corporately by OceanaGold, or with public reporting on its company donation activities.

For and on behalf of the Organisation:

Name:

Position:

Signature:

Date:

Checklist

Before sending in your application, please check that you have:

- YES Answered all the questions
- YES Included a pre-printed deposit or copy of the bank verified account
- YES Completed the Applicant's Declaration with two signatures
- YES Included a copy of Charities Commission Certificate (if applicable)
- YES Included your latest financial balance sheet or annual balance sheet.
- YES Included a copy of your Trust Deed (if applicable)
- YES Included your full project budget for this funding application
- YES Included any other additional and/or letters of support

OceanaGold Office Use Only

Date Application Received:		Date Funding Committee Meeting Held:	
Application:	REJECTED / ACCEPTED	Funding Amount:	\$
Purchase Directly:	NO / YES	GST:	\$
Date Payment Account Lodged:		Date Applicate Advised:	