



Community Road Safety Application for Programme Funding 2018 - 19

Contact Details

Name:

Organisation:

Address:

Telephone:

Mobile:

Fax:

Email:

Position:

All applicants

Please attach information about your organisation including the latest audited financial report.

1. Project Title

2. Describe your initiative and why the programme or initiative is needed in your community

4. If any other organisations or groups are involved, what will they do?

5. **Project Evaluation**

i. State how the project will be evaluated after completion in terms of achieving its outcomes/goals. For example, pre- and post-implementation surveys, numbers successfully completing the programme etc.

ii. How will you manage health and safety for any event and activities?

6. Are you applying for funding elsewhere for this initiative?

Yes No

If yes, to whom and for what amount?

7. **Proposed Budget**

Please note that only 64% of the cost of this project can be funded. The remaining 36% must be funded from your organisation's own funds or from another source. Please calculate the value of this other contribution and include in the other column. Please note: In kind contributions (for example, use of organisation's own resources and goods where there is no financial cost incurred) will not be accepted as costs attributed to the other column.

Outline of expenditure (in category areas, eg. venue hire, publications). Use separate sheet if needed.

Project Budget	Horizons Regional Council	Other
Totals		
TOTAL COST FOR PROJECT		

Signed: _____
Position Held: _____
Date: _____

For further information about, or assistance with, this application please contact your local road safety coordinator.

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