



Robert Dickson Education Trust



application form

The purpose of the Robert Dickson Education Trust is to provide financial assistance “For such educational purposes as the trustees consider fall within the general objectives of the defunct Birthright (Feilding) Society. The objects of the society (were):

“...to make available in and about Feilding, a service of advice and guidance to children and their mothers where the support and guidance of the father is no longer available and to assist in all matters to do with the education, development and advancement in life of such children, and to do all such things as are incidental or conducive to the attainment of all or any of the aforesaid objects”.

Note:

- Information contained in this application will be viewed by the Community Wellbeing Subcommittee’s Chairperson only. Personal details will not become part of any public documentation.
- **For eligibility and general information see page 4 of this application form.**

Applicant details

1. Name of applicant
2. Residential Address
3. Postal Address
- (if different to above)
4. Phone

Referee details

Please note applications **must be** endorsed by a social services organisation or other similar organisation that can verify that support of the father is currently not available.

1. Name of organisation
2. Contact Person
3. Address
4. Phone (day)..... (night)

Funding details

1. Please provide details of what you are seeking funding for? (Attach additional sheets if necessary)
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-
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Financial details

1. Please list below the item(s) and the cost of these item(s) for which you are seeking assistance.

Note:

- All figures must be GST inclusive
- A written quotation on all costs is to be attached

| Item | Cost (GST Inclusive) | Your contribution | \$ |
|----------------------------------|-------------------------|-----------------------------------|----|
| | | Funds on hand | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total cost of the project is (A) | | Total of your contribution is (B) | |

To find out how much money you should apply for, subtract your contribution (B) from the total cost of the project (A). The answer is the amount of money you require in order for the project to go ahead.

How much money are you applying for? \$

2. If applying for a grant towards a school uniform please state the reason you require a new uniform.

- My child / children are advancing to the next level of schooling
- We / my child have just relocated here
- My child / children have grown and require larger sizes but are not changing schools
- My child/children are changing schools. Please state reason for changing schools

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(Continue on another page if necessary)

3. Please complete the below if you have received funding from Council before.

| Date | Amount | Purpose |
|------|--------|---------|
| | | |
| | | |
| | | |
| | | |

4. Please give details below if you have received funds or assistance from the below agencies in the past two years

| Funding Organisations | Project | \$ received | Year |
|---|---------|-------------|------|
| Work and Income (grants) | | | |
| School hardship grants / financial assistance | | | |
| Other | | | |

5. Please provide any other relevant information (that would support your claim for this funding) ie special circumstances/needs, financial hardship issues.

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(Continue on another page if necessary)

Declaration

I/We consent to the Manawatu District Council collecting the personal contact details provided above, retaining and using these details to assess information supplied as part of this Robert Dickson Education Trust funding application. I/We acknowledge my rights to have access to this information. This consent is given in accordance with the Privacy Act 1993.

I hereby declare that the above information supplied is correct.

Name

Signed

Date

Check list

- Have you answered every question?
- Have you included written quotations?
- Have you notified the referee?
- Have you attached a letter from a social services organisation or other similar organisation that can verify your current circumstances and who supports your application?

Please return your application to
Manawatu District Council
135 Manchester Street, Private Bag 10 001, Feilding 4743
T (06) 323 0000 **F** (06) 323 0822 **E** public@mdc.govt.nz
www.mdc.govt.nz

General information

- Upon receipt of your application it will be considered by the Community Wellbeing Subcommittee's Chairperson.
- You will be notified if your application has been successful within seven working days of receipt of your application.
- Funding will not be given retrospectively.
- Grants will be paid directly to the school or agency to which you have provided written quotations or invoices for
- Applications will not proceed until all the information, required by Council in this form has been provided.

Eligibility

- Applicants must reside within Manawatu District Council boundaries.
- Applicants must be ***“children and their mothers where the support and guidance of the father is no longer available”***.
- The purpose of the grants is to ***“assist in all matters to do with the education, development and advancement in life of such children, and to do all such things as are incidental or conducive to the attainment of all or any of the aforesaid objects”***.
- Applications must be endorsed by a social services organisation or other similar organisation that can verify that support of the father is currently not available.

Need help?

Please spend time adequately preparing your application. If you have any further queries or need help with completing the application please feel free to contact

Vicki Wills, Community Development Adviser

Manawatu District Council

T 323 0000 ext 751 **E** vicki.wills@mdc.govt.nz