



# STELLENBOSCH

STELLENBOSCH • PNIEL • FRANSCHHOEK

MUNICIPALITY • UMASIPALA • MUNISIPALITEIT **APPENDIX A**

Community and Protection Services : Community Development

## APPLICATION FOR GRANT-IN-AID: 2019/20

**NOTE: ATTENDANCE OF THE GRANT-IN-AID WORKSHOP IS COMPULSORY**

PLEASE COMPLETE THE FOLLOWING			
<b>A</b>	<b>REGISTERED NAME OF ORGANISATION</b>		
<b>B</b>	<b>DATE AND YEAR IN WHICH THE ORGANISATION WAS FOUNDED:</b> (include a brief description of the business or activities of the organization)		
<b>C</b>	<b>ADDRESS OF REGISTERED ORGANISATION</b>		
	<b>PHYSICAL ADDRESS</b>	<b>POSTAL ADDRESS</b>	
	<b>CODE:</b>		<b>CODE:</b>
<b>D</b>	<b>CONTACT DETAILS</b> (Details of the person to contact regarding this GIA application)		
	<b>NAME &amp; SURNAME:</b>		
	<b>POSITION:</b>		
	<b>TEL:</b> ( )	<b>FAX:</b> ( )	
	<b>MOBILE:</b>	<b>ALTERNATIVE:</b>	
	<b>EMAIL ADDRESS:</b>		

<b>E REGISTRATION:</b>				
<b>Is the organization a NP/NG Organisation?</b>		<b>YES</b>		<b>NO</b>
<b>If YES, please provide the Registration Number:</b> (Attach a copy of the registration certificate or proof of other affiliation where applicable)				
<b>F BOARD/COMMITTEE MEMBERS OF THE ORGANISATION:</b> (List ALL Board/Committee Members of the Organisation) Insert a separate page if the space is not enough).				
<b>1</b>	<b>NAME &amp; SURNAME:</b>			
	<b>POSITION:</b>			
	<b>ADDRESS:</b>			
	<b>CONTACT NUMBER:</b>			
<b>2</b>	<b>NAME &amp; SURNAME:</b>			
	<b>POSITION:</b>			
	<b>ADDRESS:</b>			
	<b>CONTACT NUMBER:</b>			
<b>3</b>	<b>NAME &amp; SURNAME:</b>			
	<b>POSITION:</b>			
	<b>ADDRESS:</b>			
	<b>CONTACT NUMBER:</b>			
<b>4</b>	<b>NAME &amp; SURNAME:</b>			
	<b>POSITION:</b>			
	<b>ADDRESS:</b>			
	<b>CONTACT NUMBER:</b>			

5	<b>NAME &amp; SURNAME:</b>	
	<b>POSITION:</b>	
	<b>ADDRESS:</b>	
	<b>CONTACT NUMBER:</b>	
6	<b>NAME &amp; SURNAME:</b>	
	<b>POSITION:</b>	
	<b>ADDRESS:</b>	
	<b>CONTACT NUMBER:</b>	
7	<b>NAME &amp; SURNAME:</b>	
	<b>POSITION:</b>	
	<b>ADDRESS:</b>	
	<b>CONTACT NUMBER:</b>	
8	<b>NAME &amp; SURNAME:</b>	
	<b>POSITION:</b>	
	<b>ADDRESS:</b>	
	<b>CONTACT NUMBER:</b>	

9	<b>NAME &amp; SURNAME:</b>		
	<b>POSITION:</b>		
	<b>ADDRESS:</b>		
	<b>CONTACT NUMBER:</b>		
10	<b>NAME &amp; SURNAME:</b>		
	<b>POSITION:</b>		
	<b>ADDRESS:</b>		
	<b>CONTACT NUMBER:</b>		
<b>G PREVIOUS FUNDING:</b>			
<b>Have you successfully applied and received Stellenbosch Municipal Grant-In-Aid funding previously?</b>			
<b>If yes for which financial year?</b>			
<b>What amount was received?</b>			
<b>Did you submit Financial Reports for the funds received?</b>			
<b>Do you receive any other sources of funding?</b> (If YES please provide details)			
<b>H CATEGORY A:</b>			
For more information refer to the Grant-In-Aid Policy for general guidelines and categories (Please categorize your application by marking the appropriate category with X)			
<b>HEALTH</b>			
<b>ENVIRONMENT</b>			
<b>SOLID WASTE</b>			
<b>SOCIAL DEVELOPMENT</b>			
<b>SPORTS &amp; RECREATION</b>			

<b>CATEGORY B:</b>					
For more information refer to the Grant-In-Aid Policy for general guidelines and categories (Please categorize your application by marking the appropriate category with X)					
<b>NIGHT SHELTER</b>					
<b>OTHER</b> (Please specify)					
<b>I REQUEST FOR FUNDING:</b>					
<b>Is funding required for the ensuing year?</b>		<b>YES</b>		<b>NO</b>	
<b>Is funding required for a specific project?</b> (If YES attach details separately)		<b>YES</b>		<b>NO</b>	
<b>Is funding required for General Support?</b> (If YES, attach a copy of the Organisation's Overall Budget)		<b>YES</b>		<b>NO</b>	
<b>Budgeted amount requested</b>					
<b>Duration of project?</b>					
<b>J SERVICE FOCUS</b>					
<b>Ward number in which services are delivered</b>					
<b>Which Ward Priority/ies are addressed through the service:</b> (Please provide details below)					
<b>Which Municipal Strategic Goal/s is linked to the services:</b> (Please mark with a X)					
Preferred Investment Destination					
Greenest Municipality					
Dignified Living					
Safest Valley					
Good governance and Compliance					
<b>K THE FOLLOWING MUST BE ATTACHED TO THIS APPLICATION:</b> (Please use this form as a check-list, to ensure that you comply to the specified requirements)					
<b>1</b>	<b>AUDITED FINANCIAL STATEMENTS</b> (A copy of the latest audited financial statements. Should the organization be classified as an emerging organization, the financial statements MUST be dated and signed by the Treasurer and Chairperson and MUST include a monthly income and expense statement for the months that the organization has been in existence or for the last 12 months)				
<b>2</b>	<b>ORGANISATIONAL CONSTITUTION</b> (A signed and dated copy of the Organisation's Constitution, as well as a signed copy of the Minutes of the AGM, to verify the acceptance of the Constitution.)				
<b>3</b>	<b>PROJECT PROGRAMME/BUSINESS PLAN</b> (A copy of the project/program description and/or a business plan for the ensuing financial year. Please ensure that the following is included in the project/program and or business plan, by using the below mentioned bullet points as a guide).				
	❖ Full details of the proposal/project/business plan including objectives;				
	❖ The number of people who will benefit and how the project/program will contribute or enhance the strategic objectives of Stellenbosch Municipality;				
	❖ The project/program commencement and completion dates;				
	❖ Information on the total costs of the project/program budget;				
	❖ A breakdown of costs and an outline of any contributions by fundraising and / or own contributions;				
	❖ A list of all other sources of funding together with the assessments;				
	❖ A summary of past achievements;				
	❖ Reference independent of the applicant and its executive/board or committee members.				
<b>4</b>	<b>SIGNED AND STAMPED CREDITOR CONTROL FORM</b> (An original signed copy of a correctly completed Creditors Control form of the Stellenbosch Municipality)				

<b>5</b>	<b>ACCOUNT ON EXPENDITURE FOR PRECEDING FUNDING</b> (If you have received funding from Stellenbosch Municipality in the preceding financial year, expenditure of the funds received needs to be accounted for with this new application). Please refer to Section K for the format.	
<b>6</b>	<b>PROOF OF REGISTRATION/AFFILIATION</b> (Attach a copy of the organisation's Registration Certificate of Affiliation)	
<b>L</b>	<b>FORMAT FOR FEEDBACK REPORT</b> (Please ensure that your feedback of previous funding received, includes the following)	
<b>1</b>	Narrative report on the project including numbers reached, outcomes reached, outcomes reached, evaluation of the project indicating successes and failures/lessons learned.	
<b>2</b>	Pictures of the project/program.	
<b>3</b>	Financial report on expenditure regarding previous donation separate from the annual financial statements. (Attach proof of expenditure).	
<b>M</b>	<b>THE FOLLOWING SHALL APPLY:</b>	
<b>1</b>	The allocation of Grant-In-Aid will only be considered if the application document has been fully completed and signed and is accompanied by the required and supporting documentation referred to therein.	
<b>2</b>	An applicant who has been registered as a non-profit organization in terms of Section 13 of the Non-Profit Organisation Act, 1997, and the necessary proof thereof is submitted together with this application.	
<b>3</b>	Applicants must in their submission clearly indicate/specify and motivate what the funds will be utilized for.	
<b>4</b>	The Grant-In-Aid must be exclusively utilized for the purpose defined and the successful applicant must submit the necessary undertaking to this effect.	
<b>5</b>	Applicants must in their submission satisfy the Council of their ability to execute the project successfully.	
<b>6</b>	Organisations who have already received financial or other assistance from the Council during the previous financial year <b>MUST</b> specify same in their application.	
<b>7</b>	No funding will be considered for political groupings, churches or ratepayers organisations.	
<b>8</b>	No funding will be considered where only an individual will benefit or where a member of Council or an official of Stellenbosch Municipality will receive any financial or other gain.	
<b>9</b>	Projects outside the boundaries of the Council will not be considered.	
<b>10</b>	Expenditure that will not be funded includes: travel costs (unless it is for the transport of beneficiaries), subsistence, accommodation, food (unless intended for the beneficiaries) or entertainment expenses of any kind, staff salaries including bonuses, bursaries and payments in lieu of rates or other municipal charges.	
<b>11</b>	Subsequent requests from the applicants to cover overspending on projects will not be considered.	
<b>12</b>	Successful applicants must at all times comply with the provisions of Section 67(1) of the Municipal Finance management Act no. 56 of 2003 which inter alia stipulates that the organization or body has to:-	
	<ul style="list-style-type: none"> <li>❖ Enter into and comply with a Memorandum of Agreement with the Municipality as well as with all reporting financial management and auditing requirements as may be contained in such an agreement. This memorandum of agreement will bind the successful applicant to deliver on what the application speaks to, but also to commit to become involved with municipal programs of the community where it functions. The Memorandum of Agreement will be made available to successful applicants for completion.</li> <li>❖ Report monthly on the actual expenditure of the amount allocated to it. Should monthly allocations be made.</li> </ul>	
<b>13</b>	The Council reserves the right not to give a Grant-In-Aid to any organization applying for grants. Having been awarded a grant previously does not give an applicant the right to receive a grant again.	
<b>14</b>	Funding will not be considered where a project or organization is already receiving funds from Council in terms of Council's functions. Applicants are required to disclose other sources of funding, failing which such applicant will be disqualified.	
<b>15</b>	Funding will not be considered where in Council's opinion, an organization received	

	sufficient funds from other sources to sustain its activities or the project applied for. For this purpose, organisations must submit financial statements and budget for the ensuing financial year.
<b>16</b>	Organisations having received funding from Stellenbosch Municipality during the previous financial year, are required to attach to any new application, a copy of the financial statements relating to the year in which the funding was received from Council, as required in terms of Section 17 of the Non-profit Organisation Act, 1997 and Section 67(1) of the Municipal Finance Management Act, 2003 (MFMA).
<b>17</b>	Funding will not be considered where expenses have already been incurred on a project by the applicant. (The Council's Grant-In-Aid Policy must be consulted for the sake of completeness).
<b>N DECLARATION OF INTEREST:</b>	
The beneficiary declares that the following municipal employees and/or councillors have a vested interest in the business of the beneficiary. However, they do not benefit directly from this donation and were not part of the decision making process in the allocation of the donations:	
<b>Name &amp; Surname:</b>	
<b>Designation:</b>	
<b>Name &amp; Surname:</b>	
<b>Designation:</b>	
<b>O UNDERTAKING:</b>	
	<p>I/We hereby verify that the information provided in this application is true and correct and that the conditions applicable to the allocation of a grant-in-aid as set out above and in the GIA Policy have been read and is understood and will be complied with.</p> <p>I/We also declare that the organization implements effective, efficient and transparent financial management and internal control mechanisms to guard against fraud, theft and financial mismanagement and has in the past complied with requirements for similar transfer(s) of funds.</p> <p>Thus completed and signed at Stellenbosch on this ____ day of _____ 20____.</p> <p>_____</p> <p><b>Chairperson/Authorised Representative</b></p> <p>_____</p> <p><b>Secretary/Duly Authorised Signatory</b></p>
<b>P PLEASE TAKE NOTE:</b>	
(Completed application forms, together with all the required supporting documentation must be posted to):	
	<p><b>The Director: Community and Protection Services</b>  <b>P O Box 17</b>  <b>Stellenbosch</b>  <b>7599</b></p>

**Or hand delivered to:**

**The Manager: Community Development  
58 Andringa Street  
Stellenbosch  
7600**

**The submission of applications closes at 13H00 on the closing date as per the advertisement.**

**PLEASE NOTE: Neither LATE nor INCOMPLETE applications shall be considered.**