### Instructions for Grantees

This form is designed to help us understand the challenges, triumphs and insights you experienced and gained while running your funded project/program. Please be frank – while we absolutely want to know about and celebrate your successes, it's just important to us that we understand what did not work so well. This will help us to learn what we and others could do differently next time.

You must complete and submit this form no later than the date stipulated in your funding agreement. If you fail to do so you will not be eligible to apply for further grants from **Carterton District Council.** 

The completion of this form should be overseen by someone with an intimate knowledge of the funded project/program.

Note - Many of the questions in the form relate to the Carterton District Council's commitment to the Wellington Region Waste Management and Minimisation Plan. And also to ensure that projects or activities funded comply with the reduction in waste component of the Waste Levy funding.

#### **Privacy Notice**

We pledge to respect and uphold your rights to privacy protection under the Privacy Act 2020. <a href="https://www.legislation.govt.nz/act/public/2020/0031/latest/LMS23342.html">https://www.legislation.govt.nz/act/public/2020/0031/latest/LMS23342.html</a>

### **Project Report**

\* indicates a required field

### **Project Title**

This question is read only.

Please provide a short summary of the work that was completed as part of this project / program / initiative (include information on who has been involved and what you have acheived. \*

#### Word count:

Must be no more than 1000 words.

Describe the "who, what, where, when and why" of your initiative

### **Timing**

Is your project / program / initiative complete? \*

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<ul><li>Yes</li><li>No</li><li>If your initiative is still in progress, choose "no"</li></ul>				
When do you anticipate tha	t your project / program / ir	nitiative will be completed?		
Must be a date. Leave blank if this is an ongoing in	nitiative or if finish date is unknowr	ו		
Outcomes				
Outcomes are the changes that have occurred for the beneficiaries of your initiative. Generally outcomes can be framed as an increase or decrease in one or more of the following:  Skills, knowledge, confidence, aspiration, motivation Actions, behaviour, change in policy Social, financial, environmental, physical conditions.				
We also want to learn more about how you tracked the outcomes of your initiative - what you measured and how. The Carterton District Council outcomes can be found at: https://cdc.govt.nz/wp-content/uploads/2025/07/Annual-Plan-2025-26-2.pdf Provide any details of your outcomes in the box below. Include any indirect beneficiaries and intermediaries.				
Outputs				
What outputs did your initiative generate?				
Outputs are the immediate, obvious, and (usually) countable changes a project/program generates. Examples would include the amount of waste saved from landfill, how many people changed their behaviour due to this activity. Consider the waste 'hierarcy' diagram on page 8 of the Wellington Region Waste Management and Minimisation Plan.				
List your initiative's outputs below, including numbers and timeframes where possible. Leave blank any fields that do not apply to your project.				
Amount (number)	Who or What	Actual number		
AMOUNT eg; 6 (tyres), 4 (people), 50 (kg)	WHO or WHAT eg; tyres, rubbish, Keep-Cups	ACTUAL: Weight or number was calculated (50kg at transfer station)		

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Outputs: Changes in the behaviour of people				
Did your project / initiative change the behaviour of people you were targeting? For example - bringing a 'Keep Cup' to the event, understanding recycling, starting to compost food waste at home. What age demographic have changed their behaviour? Does this relate to Carterton residents, or visitors? Estimate the number of people and provide details here.				
e' please indicate the length of time for this product t. Eg; A 'Keep Cup' could be in use for 10 years.				
Did you conduct an project/program evaluation?  O Yes  No				
Please provide details of your evaluation below.				
We're interested in formal reports or (if no formal report is available) survey results, feedback/testimonials/letters, etc.				
Attach a file:				
and/or				
Must be a URL				
and/or				
	ange the behaviour of people you were targeting? p Cup' to the event, understanding recycling, ee at home. What age demographic have changed ate to Carterton residents, or visitors? Estimate the edetails here.  Be' please indicate the length of time for this product at Eg; A 'Keep Cup' could be in use for 10 years.  Please provide details of your evaluation below.  We're interested in formal reports or (if no formal report is available) survey results, feedback/testimonials/letters, etc.  Attach a file:  Must be a URL			

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Can we share your evaluation with others?	○ Yes	○ No	<ul><li>Please contact us first</li></ul>		
Who conducted your evalua	tion?				
e.g. external evaluation, internal st in particular (e.g. name / organisati					
What is your biggest learnin	ng as a result o	f undertaking th	is project/program?		
, 55	J	J			
Word count:  Must be no more than 500 words.  We are particularly interested in lessons that may help others undertaking similar work. Think about what you learned about your inputs (money, skills, personnel, time - too much; too little; about right?); your assumptions (were they 100% right, only partly right, or were the results a complete surprise?); and the context of the project/program (timing; targeted beneficiaries; geographic settings - were they right; wrong; about right?)					
Did you record any aspect o	f your project/¡	orogram through	n photographs, audio or		
video?  O Yes					
O No		3			
We'd love to see some visual and audio representations of your work. Please share below.					
Upload files:	Attach a file:				
and/or					
Provide web link:					
	Must be a URL				
	and/or				
Provide additional details:					
	Please include o	captions, if relevant			

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Can we use your media content in our own communications?	O Yes e.g. in our annual re	-	<ul><li>Please contact us first</li></ul>		
Did you provide any acknowledgement of Carterton District Council as a funder of your project/program?  O Yes O No e.g. in a media release, in a speech, on your website, in a project/annual report					
	Please provide o	letails below.			
Upload files:	Attach a file:				
Provide web link:	and/or  Must be a URL  and/or				
Additional details:					
Financial Report					
Project Income & Expenditure					
Please provide details of any project income (funds received) and project expenditure (funds spent).  Use the 'Notes' column to provide any additional information you think we should be aware of.					

Income Description	Income Type	Confirmed Funding?	Income Amount Notes (\$)			
			\$			
			\$			
			\$			

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				\$			
Expenditure Description	Expenditure	Туре	Expendit (\$)	ture Am	ountNo	tes	
			\$				
			\$				
			\$				
			\$				
Income and Expe	nditure Tota	als					
Fotal Income Amount	Total Exp	enditure Amo	ount	Inco	ome - Expend	iture	
\$	\$			\$			
This number/amount is calculated.	This nu calcula	ımber/amı ted	ount is		is number lculated.	/amount i	S
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<b>Please attach copie</b> s Attach a file:	s or receipts i	or items	s purchas	sea witi	ı granı i	unas.	
Max 5mb per file							
Certification and	d Feedback						
* indicates a required	field						
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Certification		X					
This section must be c	completed by a	n appropi	riately aut	horised	person or	n behalf (	of
the applicant organisa							
application form).							
l certify that to the application are true							115
organisation is appi	roved for this	grant, v	ve will be	requir	ed to ac		terms
and conditions of th	e grant as ou	itiinea ir	tne lett	ег от ар	provai.		
l agree	0	Yes			⊃ No		
Name of authorized	T:+1	о Гi	ret Name	١٥	st Name		
Name of authorised person *	Titl	e FII	rst Name	La	ist Name		
	Mus	st be a ser	nior staff me	ember. ho	pard mem	ber or ann	propriately
		horised vo					
Position *							
	Dag	ition hold	in applicant	t organica	ation (a.c.	CEO Tra	ocuror)
	P05	ition neid	ııı applicafil	ı uryallısa	auon (e.d.	CEO. Hea	35UIEI)

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Contact Phone Number *	We may contact you to verify that this application is authorised by the applicant organisation				
Contact Email *					
D-1- *	Must be an email address.				
Date *	Must be a date				
Feedback					
	his form. Before you review your application and click a few moments to provide some feedback.				
Did you find the reporting prowork?  O Yes O No	ocess useful in helping to understand your own				
Please provide us with your suggestions about any improvements and/or additions to this form that you think we need to consider:					