

# TongaHealth Sponsorship Guidelines

*(Fakahinohino ki he Kole Tokoni mei he Kautaha Tonga Mo'uilelei)*

## 1. About the sponsorship program *(Fekau'aki mo e polokalama kole tokoni)*

Sponsorships provide an opportunity for TongaHealth to support activities that improve health and decrease people's risk of non-communicable diseases (NCDs). The TongaHealth Sponsorship Program is a key strategy for TongaHealth to achieve its vision of **'A healthy Tonga where everyone is responsible for promoting health and everyone shares in the benefits of a healthy population'**. The "TUIAKI 'I HE 'AMANAKI KI HA TONGA MO'UI LELEI"— National Strategy for Prevention and Control of Non - Communicable Diseases 2021-2025—identifies key goals and activities to address NCDs in Tonga. To see the strategy, please click [here](#)<sup>1</sup>. *(Koe polokalama tokoni fakapa'anga iiki 'a e Kautaha Tonga Mo'uilelei 'oku fakataumu'a ke fakaivia ha polokalama ke tokoni ki he mo'ui lelei mo fakasi'isi'i 'a e tu'u lavea ngofua 'a e kakai 'o e fonua ki he mahaki 'oku 'ikai ke pipihi (NCDs). Koe polokalama ni ko hono taumu'a ke malava 'e he Kautaha Tonga Mo'uilelei 'o a'usia 'ha Tonga Mo'uilelei pea ongo'i 'e he Tonga kotoa ko hono fatongia ke faka'ai'ai 'a e mo'ui lelei pea ke vahevahe taau 'a e kakai 'i he lelei fakalukufua 'o ha kakai pe fonua 'oku mo'ui lelei'. Koe 'TUIAKI 'I HE 'AMANAKI KI HA TONGA MO'UILELEI' – Ko e Palani Fakafonua ki hono Faka'ehi'ehi mo hono Mapule'i 'o e Fokoutua 'oku 'Ikai Pipihi 2021-2025 – 'oku ne fakaha mai ai 'a e ngaahi taumu'a moe ngaahi ngaue ke fakahoko ke fakafepaki'i 'aki 'a e fokoutua 'ikai ke pipihi 'i Tonga ni. Ke vakai ki he palani fakafonua, kataki lomi 'i heni<sup>2</sup>.)*

## 2. Priority theme for this sponsorship grant round *(Ngaahi taumu'a mahu'inga 'o e polokalama kole tokoni fakapa'anga iiki)*

**Activities that improve or create opportunities for people to:** *Ko ha ngaahi polokalama 'e tokoni pe fakatupunga ha ngaahi faingamalie 'a e kakai ke:*

- Engage in more physical activity *(Kau atu ki ha ngaahi polokalama mo'ui longomo'ui).*
- Improve healthy eating patterns *(Fakalalakaka'i mo lelei ange ai 'a e sipinga ma'u me'atokoni mo'ui lelei).*
- Cut down or quit tobacco use *(Feinga ke tuku pe ta'ofi 'aupito 'a e ma'u tapaka).*
- Quit or limit alcohol consumption to a safe level *(Ta'ofi pe fakangatangata 'a e ma'u kava malohi ki ha tu'unga malu mo taau).*
- Pilot innovative ideas for addressing NCDs *(Pailate ha ngaahi fokotu'u fakakaukau ki ha ngaahi polokalama ke tau'i 'aki 'a e fokoutua 'ikai ke pipihi).*

<sup>1</sup>[https://www.tongahealth.org/\\_files/ugd/5ce0eb\\_c152d65e1f6d431991c65860818c15d1.pdf](https://www.tongahealth.org/_files/ugd/5ce0eb_c152d65e1f6d431991c65860818c15d1.pdf)

<sup>2</sup>[https://www.tongahealth.org/\\_files/ugd/5ce0eb\\_c152d65e1f6d431991c65860818c15d1.pdf](https://www.tongahealth.org/_files/ugd/5ce0eb_c152d65e1f6d431991c65860818c15d1.pdf)

Priority will be given to applications from (*'E fakamahu'inga'i 'a e tohi kole mei:*)

- i. 'Eua Island, because of piloting the Healthiest Island (*'Eua, koe'uhi ko hono pailate'i 'o e Motu Mou'ilelei taha*)
- ii. First time applicants only (*Kau fuofua tohi kole kotoa pe*)

### 3. OBJECTIVES OF THE SPONSORSHIP PROGRAM (*Ngaahi taumu'a 'o e polokalama tohi kole tokoni*)

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- a. Increase opportunities for community-based programs that target NCD risk factors<sup>3</sup> among Tongan people. (*Ke fakatupulaki 'a e faingamalie ki ha ngaahi polokalama 'a e ngaahi kulupu ke ta'ofi'aki 'a e ngaahi to'onga mo'ui 'oku tu'u lavea ngofua ai 'a e kakai ki he mahaki 'ikai ke pipihi*)
- b. Encourage healthy lifestyles through the effective promotion of health messages relating to the priority theme for this grant round. (*Faka'ai'ai 'a e ngaahi to'onga mo'ui lelei mei hono tu'uaki atu 'a e ngaahi fekau mahu'inga ki he mo'ui lelei*)
- c. Reduce the promotion of unhealthy messages or brands that undermine TongaHealth objectives. (*Fakasi'isi'i 'a hono tu'uaki 'o e fekau 'oku 'ikai ke mo'ui lelei pe koe ngaahi fakahingoa 'oku ne fakavaivai'i 'a e taumu'a ngaue 'a e Kautaha Tonga Mo'uilelei*)
- d. Facilitate environmental, social, and policy changes within organisations and venues to create healthy environments. (*Fokotu'utu'u pe palani 'a e polokalama ki he 'ataakai, sosiale mo e liliu 'a e tu'utu'uni 'i ha kautaha pe feitu'u ke fa'u ai ha 'ataakai mo'uilelei*)
- e. Increase opportunities for Tongan people to benefit from programs that target priority areas and risk factors for NCDs. (*Fakatupulaki 'a e faingamalie ki he kakai Tonga ke 'aonga kiate kinautolu 'a e ngaahi polokalama taumu'a ki he feitu'u koia mo e ngaahi to'onga mo'ui 'oku ne fakatupulaki 'a e NCDs*).

### 4. ELIGIBILITY CRITERIA (*Ngaahi fiema'u kae kau ki he kole tokoni*)

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- a. WHO IS ELIGIBLE TO APPLY? (*KO HAI 'E MALAVA KE KAU HE TOHI KOLE?*)
  - i. **Must be a:** (*Kuo pau koe :*)
    - First time applicants, AND/OR (*Fuofua fakahu tohi kole mai eni, MO E / PE*)
    - Applicant from 'Eua (*Kole tokoni mei 'Eua*)
  - ii. **Must be one of the following groups:** (*Kuo pau koe taha e ngaahi kulupu ni :*)
    - Not-for-profit organisations/registered charities (*Ikai koha Ngaue'anga fakatupu pa'anga/Kautaha Tokoni kuo Lesisita*)
    - Incorporated entities/organisations/companies (*Ngaue'anga/Kautaha 'osi lesisita*)
    - Recreational or sporting organisations (*Kulupu Fakafo'ituitui pe Fakafeohi pe Fakafiefia/ Kautaha Sipoti*)
    - Village Councils/Boards (*Kosilio Faka-kolo / Poate*)
    - Community groups with more than 8 members from different home (*Kulupu fakakolo 'oku 'iai hono memipa 'e toko 8 pe lahi ange meihe ngaahi 'api kehekehe*)
    - Churches (*Ngaahi Siasi*)
    - Schools (*Ngaahi Ako'anga*)
    - Workplaces (*Ngaahi Ngaue'anga*)

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<sup>3</sup> NCD Risk Factors: Unhealthy diet, Physical inactivity, Tobacco consumption, Harmful use of alcohol

- b. Applicants must provide proof of their groups or organisation reputation and existence such as certificate of incorporation or constitution, letter of support from Town officer/ Church Minister whichever is applicable and a Bank Account. (*Kuo pau ke 'omai ha fakamo'oni koe kulupu 'oku lolotonga lele, hange ko ha tohi lesisita, konisitutone, ko ha tohi poupu meihe Ofisakolo/Faifekau pe ko e tohi pangike*).
- c. Individuals are not eligible for sponsorships (*Ko e kole taautahaa 'oku ikai tali ke fakahuu mai hanau foomu kole tokoni*).
- d. Applicants for sponsorships must not accept any form of funding from alcohol & tobacco companies, parent companies, or their subsidiaries; either directly or indirectly. (*Ko e kole kotoa pe kuo pau ke 'oua tenau tali ha tokoni fakapa'anga mei ha kautaha 'olokaholo pe tapaka, pe koha kupu fekau'aki 'o e ngaahi kautaha ni tatau pe pe koe tokoni hangatonu pe fou i ha fa'ahinga founa tokoni kehe*).
- e. For applications to be considered, applicants must complete all sections of the application form. Review that you have checked all the checklist requirements before submitting your application. Any incomplete application will not be accepted. (*Ke kau ho'o foomu kole tokoni 'i hono 'a'ahi, kuo pau ke kakato 'a e fakafonu ho'o foomu. Fakapapau'i 'oku ke fakakakato 'a e ngaahi fiema'u kimu'a pea toki fakahuu mai ho foomu kole. Koe foomu 'oku ta'e kakato 'e 'ikai ke tali*).
- f. Please note the budget limit for any sponsorship request is \$2,000TOP. (*Kataki fakatokanga'i ange koe lahi e pa'anga 'e lava ke fai mai kiai ha kole koe pa'anga 'e \$2000TOP*).

## 5. TYPES OF ACTIVITIES/AREAS THAT TONGAHEALTH WILL FUND (Fa'ahinga polokalama 'e fakapa'anga 'e he TongaHealth)

- a. Best new innovative project idea on two or more risk factors for NCDs (*Poloseki fakakaukau fo'ou lelei taha fekau'aki moe ngaahi me'a 'e 2 pe lahi ange 'oku ne fakatupunga 'a e fokoutua ikai ke pipihii*).
- b. Sports and arts: festivals, theatre/dance productions, aerobics competitions, exhibitions, etc. where there is a significant opportunity to promote behaviour change and health promoting environments. (*Sipoti pe aati: ngaahi katoanga, tulama/fa'u tau'olunga pe faiva, fe'auhi fakamalohisino, faka'ali'ali moe ngaahi mea' pehe 'aia 'oku 'iai 'a ene faingamalie ke faka'ai'ai 'a e lilu 'a e to'onga mo'ui pea moe faka'ai'ai 'a e 'ataakai mou'i lelei*).
- c. Community events: reoccurring or annual events, such as agricultural shows, cultural events, church, and school events. (*Ngaahi polokalama fakakolo: 'oku fakahoko ma'upe pe fakahoko fakata'u, hangee koe faka'ali'ali ngoue, polokalama fakafonua, siasi pe polokalama fakaako*).
- d. Development or improvement of policies, rules, or strategies that create a more supportive environment for healthy behaviour (for example, creating safe breast-feeding areas or no smoking / alcohol areas, etc (*Fa'u pe fakalelei'i 'o ha lao fakahinohino, tu'utu'uni, pe palani 'oku ne faka'ai'ai 'a e 'ataakai ki he to'onga mo'uilelei (hange koe fa'u 'oe feitu'u fe'unga ki he fakahuu e fanau valevalee pe feitu'u tapu ai 'a e ifi tapaka pe 'olokaholo moe ngaahi me'a pehe*).
- e. A local workshop, meeting or forum focusing on NCD-related health promotion or creating more supportive environments for healthy lifestyles. (*Ngaahi fakataha'anga fakalotofonua, fakataha'anga felave'i moe tokangaekina 'o e fokoutua 'ikai ke pipihi pe faka'ai'ai e 'ataakai ki he to'onga mo'ui lelei*).
- f. Sporting event promotion, marketing or publications, and sports-related equipment/clothing. (*Faka'ai'ai 'o ha polokalama sipoti, tu'uaki pe pulusi ha tohi, naunau sipoti pe vala sipoti*).
- g. Health promotion-related professional development activities. (*Ngaahi ngaue ki hono fakatupulekina pe fakaivia e ngaue ki hono faka'ai'ai 'o e mou'ilelei*).

- h. Scaling up of successful programs and interventions to increase participation, expand to new geographic areas, or adapt programs to help target new populations. (*Fakalahi 'o e ngaahi polokalama kuo ola lelei ke fakatokolahi e kau mai kia, ke fakalahi ki ha 'elia 'oku lahiange pe ko hono ohi mai ha polokalama 'oku fakatefito ke tokoni ki ha falukunga kakai fo'ou*).
- i. Speakers and PA systems price must be no more than \$700 of the total sponsorship budget (maximum of \$700 or below). (*Koe totongi ki he sipika pe me'alea kuo pau ke 'oua toe laka hake 'i he \$700 (Ngata pe 'i he \$700 pe si'isi' ai)*).

## 6. WHAT WE WILL NOT FUND (Ngaahi me'a 'e 'ikai ke fakapa'anga)

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- a. Costs associated with running an organisation such as staff salary. (*Fakamole ki hano fakalele faka'aho 'o ha kautaha hange koe vahe 'o e kau ngave*)
- b. Fundraising. (*Feingapa'anga*)
- c. Overseas travel for conferences, workshops, forums etc. (*Folau fakatu'apule'anga ki he konifelenisi, fakatahangave, fakataha'anga etc*)
- d. Activities that promote a political organisation or perspective. (*Ngaahi polokalama 'oku ne faka'ai'ai ha kautaha pe fakakaukau fakapolitikale*)
- e. Food or beverages that do not comply with the objectives of TongaHealth. (*Me'akai pe inu 'oku ikai ke feunga moe taumu'a ngave 'a e Kautaha Tonga Mo'uilelei*)
- f. Any activities that are not related to NCD-related health promotion or creating more supportive environments for healthy lifestyles. (*Fa'ahinga polokalama 'oku ikai felave'i mo e tokangaekina e fokoutua 'ikai ke pipihi pe 'ikai ke ne faka'ai'ai e 'ataakai ki he to'onga mo'ui lelei*)

## 7. PRIZE POLICY (Tu'utu'uni 'o e ngaahi pale)

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- a. Awards and prizes must be no more than 10% of the total sponsorship maximum budget (max \$200). (*Kuo pau ke 'oua na'a toe laka hake 'a e ngaahi pale 'i he 10% 'o e patiseti fakakatoa (lahi taha 'e lava ke ngave'aki ki he pale koe \$200)*)
- b. Awards and prizes may not be given in the form of cash. Instead, awards and prizes must be in the form of health-promoting items: sports equipment, gym vouchers, etc. and must approved by TongaHealth first. (*Ko e ngaahi pale, 'e 'ikai ke lava ke foaki pale pa'anga ma'u pe, pea koe founa fakapale ko e ngaahi me'a 'oku ne fakatupulaki e mo'uilelei 'o hange ko ha naunau ki he sipoti, vausia ki he fale fakamalohisino, etc ka kuopau ke 'uluaki fakangofua mei he Kautaha Tonga Mo'uilelei*)
- c. Awards and prizes must comply with the policies of TongaHealth (i.e., no alcohol, tobacco, or unhealthy products). (*Koe ngaahi pale kuo pau ke fakatatau ki he ngaahi tu'utu'uni 'a e Kautaha Tonga Mo'uilelei ('aia 'e 'ikai ngofua ha kava malohi tapu, tapaka pe ko ha ngaahi koloa 'oku ikai ke mo'uilelei*)

## 8. REQUIREMENTS FOR APPLICANTS (Ngaahi Fiema'u Ki he Kau Tohi Kole)

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- a. Demonstrate that the sponsorship will contribute to the goals, outcomes, and strategies outlined in the National NCD strategy 2020-2025. (*Fakaha'a'i koe tohi kole 'e tokoni ki he ngaahi taumu'a ngave, ngaahi ola, mo e ngaahi palani ngave 'oku haa 'i he Palani Fakafonua ki hono tau'i 'o e fokoutua 'ikai ke pipihi 2020-2025*).
- b. TongaHealth reserves the right to review and approve any messages that are being delivered through the program receiving TongaHealth funding. This is to ensure that they are aligned with best practice

and available evidence. Funding can be withdrawn if messages are not evidence-based, health promoting, rights-based, non-discriminatory, and respectful of human dignity. (*'Oku 'i ai 'a e totonu 'a e Kautaha Tonga Mo'ui Lelei ke sivi'i mo fakangofua ha fa'ahinga ongoongo fekau'aki moe ngaahi polokalama 'oku fakahoko kiai 'a e tokoni. Ko e 'uhinga ke fakapapau'i 'oku fenapasi lelei mo e ngaahi fakamo'oni pau. 'E lava ke fakafoki mai 'a e pa'anga tokoni 'o kapau ko e ongoongo 'oku 'ikai hano makatu'unga 'i ha me'a kuo 'osi fakamo'oni'i, faka'ai'ai 'a e mo'uilelei, tu'uaki 'o e mo'ui lelei, tefito i ha me'a oku totonu, ikai filifilimanako pe laulanu, mo faka'apa'apa'i 'a e ngeia fakaetangataa*)

Ensure that TongaHealth is appropriately *acknowledged for its contribution on any promotional materials produced as part of the event/activity*. (*Fakapapau'i 'oku fakahaa'i totonu 'a e Kautaha Tonga Mo'uilelei ki he'ene tokoni 'i ha fa'ahinga naunau tu'uaki na'e fa'u ko ha kongā 'o e ngaahi polokalama na'e fakahoko*).

- c. Sponsorship recipients must comply with the Tonga Health Child Protection Policy (accessible at <http://www.tongahealth.org>). (*Koe ngaahi kole tokoni kotoa pe kuopau kenau talangofua ki he tu'utu'uni 'a e Kautaha Tonga Mo'uilelei ki hono malu'i 'o e longā'i fanau ('e lava ke ma'u e tu'utu'uni koeni mei he: <http://www.tongahealth.org>).*)
- d. Comply with TongaHealth's health mission and priority areas requirements: (*Kuopau ke muimui ki he ngaahi fiema'u mo e tu'utu'uni mo'uilelei 'a e Kautaha Tonga Mo'uilelei*)
  - a. Events MUST BE SMOKE-FREE. (*Ko e ngaahi polokalama ke 'oua 'e fai ha ifi tapaka ai*)
  - b. Healthy food and drink must be available if refreshments are provided as part of the event. (*Kuo pau koe me'akai moe inu 'e ngaahi 'oku mo'uilelei*)
  - c. Clean drinking water must be available at activities or events. (*Kuo pau ke 'iai ha vai inu ma'a 'i he ngaahi polokalama 'oku fakahoko*)
  - d. Safe warm-up and cool-down practices for any activities involving physical activity. (*Kuo pau ke fakahoko ha fakamalohisino pe faofao fe'unga he ngaahi polokalama longomo'ui*)
  - e. Alcohol is not permitted. (*'Oku 'ikai ke ngofua ha kava malohi*)
- e. Must comply with TongaHealth Sponsorship Agreement after both parties signed it. (*Kuo pau ke mou talangofua mo muimui ki he Aleapau fakapa'anga 'a e Kautaha Tonga Mo'uilelei hili e fakamo'oni hingoa 'a e ongo fa'ahi fakatou'osi*).
- f. For Application who are implementing health promoting actions in Settings: Schools, Churches and Workplaces. You must provide a letter of support or endorsement from the following: (*Ki he kau tohi kole mei he ngaahi Ako, Siasi moe Ngaue'anga , kuopau ke 'omai ha tohi pou pou pe fakaongoongolelei fakatatau ki he ngaahi me'a 'oku ha atu 'i lalo: )*
  - i. **Schools (Ngaahi Ako)**
    - Letter of support from the School Principal and endorsed by the MOH Health Promoting School Coordinators from the Ministry of Education, if your project involves young people in schools, teachers and parents. (*Tohi pou pou mei he*

*Puleako 'o e 'apiako pea poupou'i mai 'e he 'Ofisa 'Apiako Ma'alahi 'i he Potungaue Ako, kapau ko ha polokalama 'oku fekau'aki moe long'a'i fanau, kau faiako moe matu'a)*

## ii). Churches (Ngaahi Siasi)

- Letter of support from the Youth Leaders / Pastors and endorsed by the Church Leaders and the MOH Health Promoting Church Coordinator (Haofaki Mo'ui Committee member) from Church Offices if your project involves church group (*Tohi poupou mei he taki to'utupu pe faifekau pea poupou'i mai 'e he Taki 'o e Siasi pea mo e 'Ofisa 'o e Komiti Haofaki Mo'ui mei he Ngaahi 'Ofisi Lalahi 'o e Siasi 'i Tongatapu, 'o kapau ko e polokalama ki ha kulupu 'o ha Siasi*)

## iii). Workplaces (Ngaahi Ngave'anga)

- Letter of support from the CEO or Managing Director of the organisation and endorsed by the MOH Health Promotion Workplace Coordinator if the project is from a workplace. (*Tohi poupou mei he Talekita Pule Lahi 'o e ngave'anga pea poupou'i mai 'e he 'Ofisa Tokangaekina 'a e Mo'uilelei 'i he Ngave'anga mei he Potungaue Mo'ui, 'o kapau koe polokalama mei ha ngave'anga*)

**Note: The support letter should be signed by a higher authority (e.g. CEO or President), not the applicant him/herself.**

*Fakatokangai Ange: Ko e tohi poupou kuopau ke 'omai mei he kau ma'u mafai ma'olunga, 'o 'ikai mei he tokotaha tohi kole pe.*

## 9. CO-SPONSORSHIP (Kaunga Fakapa'anga)

Applicants must inform TongaHealth of any potential or agreed co-sponsors and declare all details of any other co-sponsors or partners-sponsors will comply with the mission and objectives of TongaHealth as above. TongaHealth reserves the right to assess any reputational risk to TongaHealth posed by a potential or existing co-sponsor and reserves the right to withhold or withdraw funding. (*Koe tokotaha kole 'e pau kene fakaha totonu mai 'a e fakakiiki 'o ha kaunga faka pa'anga, pe koe kautaha 'oku nau fengave'aki tenau fai ki he misiona pe taumu'a ngave 'a e Kautaha Tonga Mo'uilelei 'o hange koia kuo fakaha atu 'i 'olunga. Koe Kautaha Tonga Mo'uilelei 'oku 'iai 'enau totonu ke siviivi'i ha ngaahi me'a 'e ala uesia ai 'a e fakahoko fatongia 'a e Kautaha Tonga Mo'uilelei mei he kaunga fakapa'anga ki he polokalam, pea 'e 'iai mo 'enau totonu ke fakatatali pe ta'ofi ha tuku atu 'o ha pa'anga tokoni*)

- a. If appropriate, allow TongaHealth to have 'naming' or 'co-naming' rights for the event (e.g. Tonga Health Fushake Zumba Program). (*Kapau 'e fiema'u, kuo pau ke faka'ataa 'a e Kautaha Tonga Mo'uilelei ke nau ' fakahingoa pe 'kaunga-fakahingoa' 'a e polokalama 'oku fakahoko (e.g. Tonga Health Funshake Zumba Program).*)

## 10. HOW TO SUBMIT AN APPLICATION FOR SPONSORSHIPS

*(Founga hono fakahu mai 'o ha tohi kole ki he tokoni fakapa'anga)*

Please check that your organization and event match the eligibility criteria in these guidelines. Then complete the form which can be picked up from our office or downloaded from the internet at <https://www.tongahealth.org/forms--applications>. Applications can be dropped off at the TongaHealth office at Vaiola Hospital Tofoa, Tongatapu or at the 'Eua Government Representative Office, 'Ohonua, 'Eua or emailed to [program@tongahealth.org.to](mailto:program@tongahealth.org.to). If you have any questions, please contact TongaHealth at (676) 25-721 Vaiola Tofoa or 770-1118 / 881-5716 'Ohonua 'Eua. *(Kataki 'o vakai'i ho'o kulupu/kautaha mo ho'o polokalama 'e fakahoko 'oku fe'unga mo tatau mo e ngaahi fiema'u 'i he tohi fakahinohino koeni. Ko e foomu kole tokoni 'oku lava 'o ma'u mei ho mau 'ofisi pe koe ma'u hangatonu mei he 'initaneti 'i he <https://www.tongahealth.org/forms--applications>. Ko e foomu kuo kakato hono fakafonu 'e lava pe 'o tuku mai ki he 'ofisi 'a e Kautaha Tonga Mouilelei 'i he Falemahaki Vaiola pe 'ofisi 'o e Fakafofonga Pule'anga 'i 'Ohonua, 'Eua, pe ko ho'o 'imeili ia ki he [program@tongahealth.org.to](mailto:program@tongahealth.org.to). Kapau 'e toe 'i ai ha ngaahi fehu'i, kataki fetu'utaki maibe ki he Kautaha Tonga Mo'uilelei ki he (676) 25-721 ki Vaiola Tofoa, pe 770-1118 / 881-5716 ki 'Ohonua 'Eua).*

## 11. WHEN TO APPLY FOR SPONSORSHIPS *(Taimi 'e faka'ataa ke fakahoko mai ai ha kole tokoni fakapa'anga)*

Application opens on the **19<sup>th</sup> August 2022** and closes on the **2nd September 2022**. TongaHealth will process the application within one month. Applications for activities that are due to take place in under a month and all incomplete applications will not be considered for funding. **Only successful applicants will be informed.** *(Ko e foomu tohi kole ki he tokoni fakapa'anga 'e faka'ataa ia he 'aho 19 'o 'Aokosi 2022 pea 'e tapuni ki he 'aho 2 Sepitema 2022. 'E ngaue 'a e Kautaha Tonga Mou'ilelei ke 'a'ahi 'a e ngaahi foomu 'i ha mahina e taha. Ka 'iai ha polokalama na'e faka'aho ke fakahoko lolotonga e taimi 'a'ahi 'o e ngaahi foomu, pe ko ha ngaahi foomu 'oku 'ikai ke kakato hono fakafonu, 'e 'ikai kau ia hono 'a'ahi. Koe ngaahi foomu pe 'e tali 'enau tohi kole temau fetu'utaki kiai)*



## Foomu Kole Tokoni (Sponsorship Application Form)

<b>1. Kautaha/Kulupu 'oku kole tokoni</b> (Organization applying for fund)	
<b>2. Fakaiikiiki fekau'aki mo e Kautaha &amp; tokotaha kole tokoni</b> ( <i>Applicant contact details</i> )	
<b>Hingoa 'o e tokotaha kole tokoni mo e tu'unga 'i he ngaue'anga</b> (Name and position in the organization)	
<b>Feitu'u 'o e Kautaha</b> (Organization Address)	
<b>Fika Telefoni</b> (Telephone)	
<b>'Imeili</b> (Email) or <b>Facebook</b>	
<b>3. Kohai 'e malava kau mai ki he tokoni koeni</b> (Eligibility criteria)  <i>Kataki 'o tiki 'a e puha 'oku ne fakamatala'i mai ho'o kautaha. Please tick which box best describes your organization.</i>	<input type="checkbox"/> <b>Kautaha Taautaha 'Ikai Ke fakatupu Pa'anga/ Kautaha Tokoni kuo Lesisita</b> (Not-for-profit organizations/registered charities) <input type="checkbox"/> <b>Potungave Fakapule'anga</b> (Government departments) <input type="checkbox"/> <b>Potungave FakaLao</b> (Statutory bodies) <input type="checkbox"/> <b>Kulupu pe Kautaha Fakatahataha Faka-Kolo pe Ngaue'anga pe Faka-Siasi</b> (Incorporated entities/organizations/companies) <input type="checkbox"/> <b>Kulupu Fakafo'ituitui pe Fakafeohi pe Fakafiefia/ Kautaha Sipoti</b> (Recreational or sporting organizations) <input type="checkbox"/> <b>Kosilio Faka-kolo, Poate</b> (Village Councils/Boards)
<b>4. Ngaahi 'elia fakataumu'a ki ai ho'o polokalama</b> (Priority areas)  <i>Kataki 'o tiki 'a e 'elia 'oku felave'i mo fakataumu'a ki ai ho'o polokalama [Please tick priorities areas to be addressed].</i>	<input type="checkbox"/> Mo'ui Longomo'ui (Engage in more physical activity) <input type="checkbox"/> Kai Mo'uilelei (Improve healthy eating pattern) <input type="checkbox"/> Ta'ota'ofi 'o e Ifi Tapaka (Cut down or quit tobacco use) <input type="checkbox"/> Ta'ota'ofi pe ma'u fe'unga 'a e 'Olokaholo (Cut down or limit alcohol consumption to a safe level) <input type="checkbox"/> Mo'uilelei 'a e fa'e fa'ele mo 'enau longa'i fanau iiki mei hono fa'ele'i ki he ta'u 2 (Tongan mothers & infants [age 2 and under] have a healthier start to life) <input type="checkbox"/> Ta'ota'ofi 'o e Faito'o Konatapu (Cut down or quit drug abuse) <input type="checkbox"/> Mo'uilelei fakalukufua moe faka'atamai (Wellbeing)
<b>5. Hingoa 'o e Poloseki/Polokalama</b> (Name of Project/Program).	
<b>6. 'Aho Fakafuofua 'e kamata mo 'osi ai ho'o poloseki</b> (Expected starting date and end date of your project )  <i>(Kuo pau ke tuku mai 'a e mahina 'e taha ke fai ai 'a e ngaue ki ho'o tohi kole. You must allow 1 month to process your application)</i>	



**7. Puipuitu'a 'o e Polokalama** (Project background and rationale)

- Koe ha 'a e palopalema pe 'uhinga 'oku fiema'u ai ke fakahoko 'a e polokalama ni 'i he feitu'u 'e fakahoko ai? (Explain the problem or why the project is required in the area?)

**8. Fakaiiki 'o e Polokalama** (Project Outline)

<p><b>9. Taumu'a (Goal)</b>  <i>Fakataumu'a ho'o polokalama ke ofi ki he ngaahi 'elia 'oku fakamamafa'i ' he TongaHealth 'a ia 'oku ha 'i he fika 4, kae fakatefito pe 'i ho'o kulupu(Please make sure your goal is related to TongaHealth- Hala Fanonga priorities stated in 4, based on your group)</i></p>	
<p><b>10. Taumu'a Ngaue (Objectives)</b>  <i>Kataki fakapapau'i 'e malava he ngaahi taumu'a ngaue koeni 'o a'usia 'a e taumu'a, hange ko e liliu 'i he 'ilo, 'ulungaanga, poto'i ngaue, 'ataakai, faingamalie ke ma'u ngofua pe ma'u ma'ama'a, fakahoko lelei e fatongia. (Please ensure your objectives help achieve your goal ↑, such as change in, knowledge, behaviour, skills, environment, accessibility &amp;, affordability, effectiveness, efficiency).</i></p>	
<p><b>11. Ola Lelei ke Ma'u mei he Polokalama (Intended Outcomes)</b>  <i>Ko ha ngaahi liliu 'oku malava ke fakahoko hili e 'osi 'a e polokalama, ka na'e 'ikai malava ki mu'a (Any changes will occur at the end of the project, they do what they could not do before)</i></p>	
<p><b>12. Ngaahi Polokalama 'e fakahoko (Key Activities)</b>  <i>Fakapapau'i 'e hoko e ngaahi polokalama ko eni 'o a'usia e ngaahi ola lelei 'i he fika 11 (Please ensure your activities help achieve your outcomes above at 11).</i></p>	

<p><b>13. 'E kau nai e fanau iiki ta'u 17 ki lalo 'i ho polokalama</b> (Are you likely to come into contact with children (aged 17 and under) in any of your activities)</p>	<p><input type="checkbox"/> 'lo 'oku te mau ngaue tefito mo e fanau iiki (Yes, we will be working directly with children)</p> <p><input type="checkbox"/> 'lo 'e 'i ai e fanau he ngaahi polokalama (Yes, children will be present during the program)</p> <p><input type="checkbox"/> 'Ikai ko e polokalama pe eni ki he kakai lalahi (No, this is an adults-only event)</p>
<p><b>14. 'Oku ke taumu'a nai ki ha tefito'i kulupu/kakai pe ko e kulupu 'oku fiema'u vivili hangē ko e kulupu kakai fefine, kakai tangata, to'utupu, fānau mo e kau faingata'a'ia.</b> (Are you targeting any specific groups, e.g. special needs groups [Women, men, young adults, youth, children, people with a disability or mental illness])</p>	
<p><b>15. Kautaha kehe 'oku nau tokoni fakapa'anga ki he polokalama</b> (Co-sponsors of the event/activity)</p> <p><i>Kataki lisi mai kinautolu pea moe fakaikiiki 'o 'enau tokoni</i>  <i>Please list any other sponsors that are providing funds for this activity/event and what they are funding.</i></p>	<p>Please list below;</p>
<p><b>16. Kuo 'osi fakapa'anga 'e he TongaHealth 'a ho'o mou polokalama ki mu'a? 'Omai 'a e 'aho pea mo ha ki'i fakamatala kataki?</b></p> <p><i>(Have you previously received funding from TongaHealth in the past? When and details please?)</i></p>	

<p><b>17. Patiseti (Budget)</b></p> <p><i>Fakatokanga'I ange:</i></p> <ul style="list-style-type: none"> <li>• Ko e patiseti koeni 'e pau ke tatau moe ngaahi polokalama 'e fakahoko 'a ia 'oku ke fakaha mai 'i he fika 12</li> <li>• 'Oku ngata pe 'a e tokoni fakapa'anga ni 'ihe pa'anga 'e \$2000</li> <li>• Koe patiseti ki he sipika ke \$700 pe i lalo hifo ai</li> <li>• Kuo pau ke tatali ke tali ho'o tohi kole pea ke toki fakahoko ha ngaahi totongi pe fakamole</li> <li>• Ko e ngaahi fakamole pe 'e fakahoko hili hono tali ho'o tohi kole fakataatau ki he Patiseti koeni, 'e fakapa'anga</li> </ul> <p><i>Please note:</i></p> <ul style="list-style-type: none"> <li>• Budget should align with your Key Activities given on section 12</li> <li>• The maximum budget for a sponsorship application is \$ 2,000 TOP</li> <li>• Speakers/PA Systems maximum budget is \$700TOP or less</li> <li>• Applicant must wait for an approval of the proposal before committing/make any payments to any items</li> <li>• The only activity/item we will commit to pay according to this Budget, are the ones incurred after the approval date.</li> </ul>	<p><b>Koloa</b> Activity/Item</p>	<p><b>Fakamatala ki hono ngaue'aki 'o e koloa ko ia ki ho'o polokalama</b> Description of how item will be used</p>	<p><b>Mahu'inga</b> Unit Cost</p>	<p><b>Lah i 'o e Koloa Qty</b></p>	<p><b>Totongi Fakakatoa</b> Total Cost</p>
	<p><b>Fakatataa:</b> For example: Pulu 'Akapulu Rugby balls</p>	<p><i>Ki he ngaahi va'inga 'akapulu mo e fakamalohisino</i> <i>For rugby games and training</i></p>	<p>\$50.00</p>	<p>2</p>	<p>\$100.00</p>
<b>TOTAL FUNDS REQUESTED (FAKAKATOA)</b>					<b>\$</b>
<p><b>18. Lipooti (Reporting)</b></p>	<p>Kuo pau ke fakakakato mai 'a e lipooti (Annex 1) mei he 'osi 'a e polokalama ni pehee ki he ngaahi fakamatala pa'anga kotoa pe ki he fakamole 'o ka 'omai ha pa'anga kiate au. (I, the applicant must provide a brief report in Annex 1 about the activities and budget expenses at the end of the program if I received any monies regarding this sponsorship).</p>				
<p><b>19. Hokohoko atu 'o e polokalama (Sustainability)</b> <i>Provide information on how you will continue to sustain your activities and maintain your equipment after funding ends. ('E angafefe nai ha hokohoko atu e polokalama moho'o mou tauhi e ngaahi koloa me'a'ofa 'e fakapa'anga 'e he TongaHealth).</i></p>					

20. KE FAKAKAKATO 'E HE TOKOTAHA 'OKU NE FAKAHŪ MAI 'A E KOLE (APPLICANT TO COMPLETE)

Hingoa 'o e tokotaha kole (Name of applicant): \_\_\_\_\_

Lakanga (Designation): \_\_\_\_\_

Fakamo'oni Hingoa (Signature): \_\_\_\_\_

'Aho (Date): \_\_\_\_\_

21. CHECK – LIST (Lisi ke fakakakato):

**Kataki 'o fakapapau'i 'oku ke fakakakato 'a e ngaahi fiema'u 'oku ha atu 'i lalo (Please make sure you complete the checklist below):**

- Fakamo'oni hingoa 'a e tokotaha kole 'l he fika 20. Ko e tokotaha kole 'oku 'ikai ngofua kene toe fakahoko 'a e tohi poupou. Kuo pau pe ke tohi poupou mai ha taha 'oku ma'olunga hake 'l he tokotaha kole. (Applicant signature on section 20. The applicant is not allowed to write the support letter. Support letter must be from a higher authority)
- Fakafonu e Patiseti 'i he fika 17 pea fakamahino'i mai 'a e polokalama/koloa 'oku kole mai ki he tokoni fakapa'anga 'a e Tonga Health (Fill in the Budget on section 17, and specify which activity/ item you are applying for TongaHealth to fund)
- Ngaahi tohi fakamo'oni ki he patiseti mei he kautaha/falekoloa (Quotation(s) for the budget)
- 'Oku a'u e tokolahi 'a e kulupu ki he toko 8 mei he famili kehekehe pe lahi hake ai (The group have at least 8 members and from different homes)
- Ki he ngaahi 'Apiako, Siasi pe Ngaue'anga. 'Omai ha tohi poupou mei he **tokotaha totonu** 'aia koia 'oku fiema'u 'i he **Palakalafi 8(h)** 'o e Fakahinohino ki he Tohi Kole (For Schools, Churches and Workplaces, Provide a letter of support and endorsement as outlined in **Section 8 (h)** of the Guidelines on 'Requirements for Applicants')

Ki he ngaahi kulupu iiki mei he ngaahi kolo (For small groups in the community):

- Tohi poupou mei he Taki 'o e kulupu 'o fakaha mai 'a e hingoa 'o e kau memipa mo 'enau fika telefoni moe tatau 'o e tohi pangike 'a e kulupu (Support letter from the Group Leader and shows the name of the members and their phone number and copy of their bank account)
- Tohi poupou mei he 'Ofisa Kolo 'okapau ko e kulupu 'i he kolo (Support Letter from the Town officer if it's a group in the village)
- 'OKAPAU 'oku 'osi lesisita ho kautaha/kulupu, kataki 'o 'omai moe la'i tohi fakamo'oni (IF your organization is registered, please provide certificate)

**NOTE: Applications without a complete check-list will be considered INCOMPLETE and will NOT be reviewed. (Ka 'ikai kakato e ngaahi fiema'u ni 'e 'IKAI ke toe fai ha sio mo hono 'a'ahi ho foomu).**

Fakamafai'i 'e (Approved by): 'Ofeina Filimoehala

Lakanga (Designation): CEO, Tonga Health

Fakamo'oni Hingoa (Signature): .....

'Aho (Date): .....



### SPONSORSHIP PROJECT REPORT

(Lipooti koeni ke fakafonu he taimi 'oku 'osi ai e polokalama)

Name of Project (*Hingoa 'o e Poloseki*): \_\_\_\_\_

Total Fund (*Lahi 'o e paanga tokoni*): \_\_\_\_\_

Date project started (*'Aho kamata ai e poloseki*): \_\_\_\_\_

Date project ended (*'Aho ne osi ai e poloseki*): \_\_\_\_\_

1. What was the main goal of your project? (*Koe ha e tefito'i taumu'a ho'o poloseki?*).
2. What were the key results did you achieve from your activities? Please show evidence of your results. (*Koeha e ngaahi ola ne ma'u meihe ngaahi ngaue ne fakahokoo? Kataki omai ha fakamo'oni ki he ngahi ola koiaa.*).
3. How did the results of your activities change the lives of your group or community? Please show evidence of the changes if any. (*Koe ha ha ngaahi liliu kuo ha mai mei ho'o kulupuu (ako'anga, siasi, kolo pe ngaue'anga) tupu meihe ngaahi ola kuo ke fakaha 'i 'olunga. Kataki 'omi ha ngaahi fakamo'oni ki he ola koiaa kapau 'iai.*
4. Would you keep the project going? If yes, why and if no, why not? (*Oku iai ha fakakaukau ke hokohoko atu e poloseki? Koeha e 'uhinga ki ho'o talii?*
5. How has the support from TongaHealth help you achieve the goals of your project? (*Ne anga fefe tokoni 'a e TongaHealth ke a'usia e taumu'a ho'o poloseki?*).
6. Do you have any other comments or recommendations? (*'Oku toe 'i ai ha'o me'a 'oku ke fie tanaki mai pe fale'i?*).
7. How did you acknowledge TongaHealth support? (*Na'e anga fefe ho'omou fakahaa'i ke 'ilo koe polokalama tokoni ena 'a e Tonga Mo'ui lelei?*)

*\* Please attached all evidence of the project including attendance sheet, pictures, receipts etc... (Kataki 'omai fakataha 'a e lipooti koeni mo e ngaahi fakamo'oni 'o e polokalama na'e fakahoko hange ko e fakamo'oni hingoa 'o e kau fakataha, 'imisi, fakamo'oni 'oe koloa na'e fakatau, moe ngaahi me'a pehee...)*

Reports prepared by (*Ko e lipooti ni na'e fa'u 'e*);

Name/Hingoa: .....

Position/Lakanga:.....PhoneNumber/Fika Telefoni:.....

Email/'Imeili (if have/kapau 'oku 'iai): .....

Date/'Aho: ...../..... /.....

MALO.