

# Application Form Round One 2024 / 2025

## Form Preview

### Beginning your application...

\* indicates a required field

**The Community Partnership Grant provides an opportunity to develop projects, events and initiatives that complement areas identified as priorities in [Southern Grampians Shire Council Plan 2021 - 25](#) or other Council plans and strategies.**

**The maximum amount that can be allocated per applicant per financial year is \$15,000 (exc. GST). Applications over \$2,500 must demonstrate a matching cash contribution.**

#### What you need to do...

**1.** Read [Community Partnership Guidelines](#). **2.** Check eligibility criteria - **ineligible applications will not be assessed.** **3.** Discuss your application with a member of Council's grants team. **4.** Identify costings needed for your proposal. Obtain quotes and seek landowner permissions if required. **5.** Seek appropriate advice around what permits might be required. **6.** Connect with other groups and seek letters of support for your application **7.** When round opens fill out the application form with all information requested. **8.** Ensure you attach all supporting documentation electronically to your submission - including quotes, financial statements, plans, letters of support and insurance. **9.** Submit your application online by the closing date. You will receive an email instantly confirming the application has been submitted.

**Have you received previous Community Partnership Grant funding? \***

☐ Yes ☐ No

#### Acquittal

It is a condition of accepting a grant that successful applicants submit an online acquittal within sixty days of completion date of funded project or event.

Recipients who have an outstanding funding acquittal for a grant, and do not have an approved variation in place, may be ineligible for funding in future grant rounds until the outstanding acquittal is completed.

#### Contact Council

You must contact Council's grants team to continue with your submission.

**Contact phone number: 03 5573 0444**

**Please advise which Council officer you have spoken to? \***

### Applicant Details

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\* indicates a required field

### Individual / Organisation (community group) \*

☐ Individual ☐ Organisation

Organisation Name

First Name

Last Name

Individuals are only eligible to apply for Arts and Culture or Heritage grants

### Individual applicant details

#### Primary Address \*

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

#### Postal Address

Address

  

#### Phone Number \*

Must be an Australian phone number.

#### Email \*

Must be an email address.

#### Bank Account \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

### Organisation (community group) details

#### Organisation Contact \*

First Name

Last Name

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**Position \***

**Organisation Address**

Address

  

**Contact Phone Number \***

Must be an Australian phone number.

**Organisation Email \***

Must be an email address.

**Secondary Email (if applicable)**

Must be an email address.

**Is your organisation incorporated? \***

☐ Yes

☐ No

Organisations must be incorporated or your will require Auspice information. Please contact Council staff for further information Ph: 5573 0444

**Organisation ABN**

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

**Organisation Primary Bank Account \***

Account Name

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BSB Number      Account Number

Must be a valid Australian bank account format.

Please confirm details are correct - successful applicants will have funds directly transferred.

### **Please attach your Public Liability Insurance Certificate \***

Attach a file:

Insurance must be in the name of the applicant, group or organisation.

## Auspice Details

Auspice agreements can be used to help community organisations access funds for their activities.

An auspice agency needs to be:

- A legal not-for-profit organisation as defined by the Australian Taxation Office (ATO) and Australian Charities and Not-For-Profits Commission (ACNC).
- An incorporated association - Comply with all requirements of the State, Commonwealth, ATO and ACNC
- Have an active ABN
- Have a bank account in the name of the legal entity.

### **Please attach a letter of support from the auspicing agency: \***

Attach a file:

### **Auspice Organisation Name \***

Organisation Name

### **Auspice ABN**

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	

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Main business location

Must be an ABN.

### Auspice Contact \*

First Name

Last Name

### Auspice Phone Number \*

### Auspice Email \*

### Auspice Bank Account \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

You must use auspice agency bank account for delivery of funds.

### Please attach auspicing agency Public Liability Insurance Certificate \*

Attach a file:

Insurance must be in the name of auspicing agency

## Project / Event Information

\* indicates a required field

### Project / Event Name \*

### Venue / Location \*

### Total Amount Requested \*

\$

What is the total financial support you are requesting in this application? (Exc.GST)

Start Date \*

End Date \*

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[Please click here to view the Community Partnership Grant Assessment Criteria \(pg.5\)](#)

**The questions and points in the link have been developed to assist you to understand the Assessment Criteria for your application.**

**These questions and points should be considered when writing your grant application.**

**WHAT is the project or event you are applying for and what will it achieve? \***

Word count:

Must be at least 50 words.

**WHY is the proposed project or activity needed? \***

Word count:

Must be at least 50 words.

**WHO is involved in the project or event? \***

Word count:

Must be at least 50 words.

**HOW will your organisation manage the funded project or activity over the funding period? \***

Word count:

Must be at least 50 words.

## Budget

\* indicates a required field

### Budget

The budget below should outline the elements you are requesting funding for through Council's Community Partnership Grant.

Ensure the budget is detailed as possible. **The amount you are requesting must be included as a funding source.**

Additional **funding sources** must be evidenced with relevant documents.

All expenditure items will require a written quote.

**Items you might include as funding source:**

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- other grant sources / donations
- organisation contribution (cash contribution)

Examples you might include as expenditure:

- project materials
- equipment (purchase or hire)
- advertising & promotional material
- entertainment costs / venue hire
- permit fees etc.

Need extra help preparing your budget? [Please click here to find helpful hints!](#)

Funding Source	\$	Expenditure	\$ Amount (Exc.GST)
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

## Budget Totals

Total Funding Source \*

\$

This number/amount is calculated.

Total Expenditure Amount \*

\$

This number/amount is calculated.

Budget Surplus or Deficit

\$

This number/amount is calculated.

## Financial Documents

**Please upload the following documentation:**

### - Quotes

If your group is applying to purchase goods, services or materials you will also be required to provide any relevant quotes.

A quote should include:

- Business name and address / customer's name and address.
- A unique quote number.
- The quote issue date / the quote expiry date.
- The description and prices of the products/services.
- The total amount of the sale.

### - Financial Statements

For grant applications over \$2500, you must provide bank statements from your organisation as evidence of matching funding held.

Council needs confirmation that you are able to meet the 1:1 funding requirement (dollar-for-dollar contribution) and have the financial capacity to complete the project before it can assess your application.

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### **Please upload: \***

Attach a file:

## Supporting Documentation

\* indicates a required field

Please upload the following documentation to strengthen your application:

- Letters of Support
- Images
- Evidence of advice obtained regarding relevant permits, approvals, permissions and licenses from the relevant authorities prior to application
- Project Plans eg. Timelines, Marketing Plans, Risk Management, Emergency Plans, Strategic Plans
- Artist's CV (for Arts projects) including links to video / audio files or previous work
- Other supporting documents you wish to include

### **Please upload supporting documents**

Attach a file:

### **Website Link**

Must be a URL.

## Declaration

- I certify that to the best of my knowledge the statements made in this application are correct.
- I consent to the information contained within this application being disclosed to or by Council for the purpose of assessing, administering and monitoring my current and any future Council grant applications.
- I consent to Council including any successful grant applications in marketing materials and press releases for the purpose of promoting the Community Partnership Grant and its outcomes.
- I understand that if the Council approves my grant, I will carry out my project as I have described and my application will form part of my contractual agreement with the Council.
- I understand that success of this application does not grant Council permit approval or fee waiver. Contact will need to be made with Council's Regulatory Services Team to discuss requirements if applicable.

**Please fill in details of the person who will endorse this application:**

**Authorising person \***



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First Name

Last Name

**Position \***

**Date of approval \***

Must be a date.