

# Application Form

## Community Grant – Micro Grant

This grant provides funding of up to \$1000 to Not-for-Profit community organisations to support local projects and initiatives for a community purpose and provide a demonstrated benefit to the Douglas Shire Region. Grant applications can be made at any time throughout the year until funding budget is exhausted.

### SECTION 1 - APPLICANT ELIGIBILITY

(If you answer NO to any of the following questions, please contact Council prior to completing an application)

	Y/N or N/A
The applicant - is a Not-for-Profit Organisation or Auspiced Organisation	
The applicant - has read the Grant Guidelines	
The applicant - is compliant with annual requirements of Office of Fair Trading, Australian Charities and Not-for-Profits Commission or Australian Securities and Investment Commission	
The applicant - is free of overdue outstanding fees or debts with Council	
The applicant - has successfully acquitted all previous Council grants	
The applicant - has an active Australian Business Number (ABN)	
The applicant - has a public liability insurance certificate of Currency	
The applicant – has received less than the maximum allowable amount of funding for this financial year	
The applicant – is <b>NOT</b> a government agency, or department of local, state or federal government, political or discriminatory group or organisation, school, university or TAFE college, or an organisation supported by gaming machine income, or that commercially trades 7 days a week with a liquor license	

### SECTION 2 - PROJECT ELIGIBILITY

The project – addresses the funding priorities:	Y/N or N/A
<ul style="list-style-type: none"> <li>Celebrate the diversity of our community</li> </ul>	
<ul style="list-style-type: none"> <li>Encourage inclusiveness and accessibility</li> </ul>	
<ul style="list-style-type: none"> <li>Enhance the liveability of our beautiful Shire</li> </ul>	
<ul style="list-style-type: none"> <li>Promote health, well-being, and safety in the community</li> </ul>	
<ul style="list-style-type: none"> <li>Recognise days or weeks of national significance</li> </ul>	
The project - aligns with one or more of the themes or goals in Council's Corporate Plan or a Strategy	Y/N or N/A
<ul style="list-style-type: none"> <li>Celebrating Our Communities</li> </ul>	
<ul style="list-style-type: none"> <li>Fostering Economic Growth</li> </ul>	
<ul style="list-style-type: none"> <li>Leading Environmental Stewardship</li> </ul>	
<ul style="list-style-type: none"> <li>Inclusive Engagement, Planning and Partnerships</li> </ul>	
<ul style="list-style-type: none"> <li>Robust Governance and Efficient Service Delivery</li> </ul>	

Project Demonstrates	Y/N or N/A
The project - addresses an <b>identified need</b> in the community	
The project - benefits the Douglas Shire community / <b>is in the public interest</b>	
The project - demonstrates evidence of <b>community support</b>	

**SECTION 3 - APPLICANT INFORMATION**

Applicant type:  Not-for-Profit Organisation  Auspice Organisation  
 (Please ensure form is completed & signed by the Auspice Organisation)

Organisation Name:

Australian Business Number (ABN):

GST registered:  Yes  No

Incorporation / Charity Number (if applicable):

Postal Address:

Have you received Council Grant(s) before:  Yes  No

If yes, which financial year(s):

Contact Person: Position:

Email: Mobile:

**SECTION 4 – FUNDING INFORMATION**

Funding Amount Requested (\$1000 maximum):

Applicants may not receive the full amount of funding but rather partial funding.

In this case, can the project proceed without full funding:  Yes  No

**SECTION 5 – PROJECT INFORMATION**

Project Title:

Start Date: Completion Date:

Project Description:

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Project site address:

**SECTION 5 - PROJECT FINANCIAL DETAILS**

Expenditure (Item)	Cost (\$)	GST (\$)	Grant (\$)
TOTALS	\$	\$	\$

**SECTION 7 – CERTIFICATION OF AUSPICE ORGANISATION**

**Please note:** Both the applicant and the auspice are considered responsible for ensuring the acquittal of grants and both could be deemed ineligible to place further applications to Council until all grants have been satisfactorily acquitted. **The auspice agrees to administer the grant that may be offered to the applicant on their behalf and that the information stated in the auspice organisation details section of this application is true and correct.**

Name of Auspice Body:

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Authorised Contact person name in full:

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Position: President / CEO (delete as appropriate)

Signature:		Date:	
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**SECTION 8 - ESSENTIAL SUPPORT MATERIAL TO BE ATTACHED TO THIS APPLICATION**

- Property Owner Approval (if applicable)

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- Certificate of Currency for Public Liability

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- Written quotes to support budget –
  - One quote for items in the budget \$500 to less than \$1500 (GST Exc)

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## DECLARATION

Please read each statement and sign to confirm your acknowledgement and agreement to these terms:

1. I certify that I have the appropriate delegation, as authorised by the applicant, to prepare and submit this application on behalf of the applicant
2. I have read the guidelines relating to the Community Grants Program and certify to the best of my knowledge the information provided in this form is correct and discloses full and accurate information of expenditure and activities proposed.
3. I understand that approval of funding is subject to mutual agreement between Douglas Shire Council and the applicant.
4. I agree to ensure **all necessary approvals/permits** are obtained prior to the project, program or event taking place.
5. I agree to provide Douglas Shire Council with any additional information required to assess this application.
6. I will provide a **certificate of currency for public liability insurance** of an appropriate amount (in total and per event), based on level of risk, that is current and remains current for the term of the project
7. I agree to abide by all relevant **health and safety** standards.
8. I understand that Douglas Shire Council does not accept any liability or responsibility for the proposal in the application.
9. I understand that if Douglas Shire Council approves the application, I will be required to accept the conditions of the grant in accordance with Douglas Shire Council requirements.
10. I agree that if funded, I will supply an Outcome Report, including a copy of all required receipts within eight weeks of completing the project, activity, or event.
11. I will acknowledge the support of Douglas Shire Council in all relevant promotional and printed material.
12. I acknowledge that Douglas Shire Council may publish details of this application and subsequent project, activity, or event, in promotional material or by way of civic and/or legislative requirements.

Name in Full:

Position: President / CEO (delete as appropriate)

Signature:		Date:	
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**Douglas Shire Council – Privacy Collection Notice:**

Douglas Shire Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which the council manages personal information is governed by *the Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with the *Local Government Act 2009* so that we can assess and finalise your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our Information Privacy Policy.

**OFFICE USE**

Application Doc ID:	Successful Application: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date:	Officer:
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