

## Application - Council Grants Program

### SECTION 1. - ELIGIBILITY CHECK (If you answer No to any of the following questions please contact Council)

<i>Please read Pages 2 and 3 of Guidelines for ineligible applicants AND ineligible projects/costs.</i>	Y/N or N/A
The application aligns with a theme or goal in Council's Corporate Plan or a Strategy	
The application addresses an identified need in the community	
The application benefits the Douglas Shire community / is in the public interest	
The project demonstrates evidence of community support	
The applicant has an active Australian Business Number (ABN)	
The applicant is an Australian citizen or permanent resident who has permanently resided in the Shire for at least the preceding 12 months, or N/A	
The applicant is a group or organisation, that primarily provides services in the Douglas Shire; or primarily provides services outside the Shire but the project is of community benefit to the Shire (provide evidence of community benefit), or N/A	
The applicant has successfully acquitted all previous Council grants, or N/A	
The applicant is free of overdue outstanding fees or debts with Council	
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 (whichever is applicable) or N/A	

Application Type	<input checked="" type="checkbox"/>	Application Type	<input checked="" type="checkbox"/>
In-kind Assistance (Non-financial)		Micro Grant	
Sponsorship		Major Grant	

Project Category	<input checked="" type="checkbox"/>	Project Category	<input checked="" type="checkbox"/>
Arts and Cultural		Economic / Industry Development	
Community Development		Environment and Sustainability	
Community Events		Sport and Recreation	
Place - Making			

### SECTION 2 - APPLICANT INFORMATION

Applicant Details	Your response <input checked="" type="checkbox"/>			
Applicant Type:	Individual		Organisation	Group / Auspice
Applicant Name:				
Australian Business Number (ABN): (compulsory)				
GST registered? Y/N				
Incorporation / Charity Number: (if applicable)				
Street Address:				
Postal Address:				
Website/Social Media Page:				

For all applicants			
Contact person regarding application:			
Phone number:			
Email address:			
Have you received Council Grant(s) before?	Yes		No
If yes, which financial year(s)?			
For Organisations			
Legal status: <i>(eg Incorporated /Company)</i>			
Authorised person: <i>(Authorised on behalf of the organisation to sign application, contract, acquittal)</i>			
Full Name:			
Position in organisation: <i>(please tick)</i>	<input type="checkbox"/> President	<input type="checkbox"/> Chief Executive Officer	<input type="checkbox"/> Director
For Groups / Auspice arrangement			
Contact person for project:			
Phone number:			
Email address:			

SECTION 3 - PROJECT INFORMATION	
Project Title: <i>(Max. 10 words)</i>	
Description of project: <b>** Please <i>attach</i> one A4 page if insufficient space <u>and</u> provide support material to support your statements.</b>	
What do you want to do?	
Why do you need to do this project?	
What community support do you have?	
How will the project benefit the community/ be in the public interest? <i>(community, economic, social or environmental outcomes)</i>	
Amount/value requested: <b>(GST Exc)</b>	\$
Proposed start date:	
Proposed completion date:	
Proposed location of project:	

Which theme/s from Council's Corporate Plan does this project align with?					
Celebrating Our Communities	<input type="checkbox"/>	Inclusive Engagement, Planning and Partnerships	<input type="checkbox"/>	Leading Environmental Stewardship	<input type="checkbox"/>
Fostering Economic Growth	<input type="checkbox"/>	Robust Governance and	<input type="checkbox"/>		

Please specify if there are other Council Plans/Strategies that your project aligns with.

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Please indicate if your proposed activity directly and specifically targets one or more of the following groups as attendees or participants.

Group	<input checked="" type="checkbox"/>	Group	<input checked="" type="checkbox"/>
Aboriginal and/or Torres Strait Islander people		People with a disability	
Australian South Sea Islander people		Older people (55 years+)	
Men		Young people (12-25 years)	
Women		Children (0-11 years)	
People from a culturally or linguistically diverse background		N/A - not specifically targeting any groups	

How many people do you expect to attend or participate in the project?

Local	Regional	State	Interstate	International

#### SECTION 4 - PROJECT PARTNERSHIPS – Non-financial (In-kind) Component

What in-kind support are you requesting from Council?

Use of Council park/hall/foreshore (*event/venue hire or other Council forms will be required for some in-kind requests*).

Use of Council plant and equipment (*subject to availability*).

What in-kind support will be contributed by others? (*Please specify or N/A*)

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## SECTION 5 - PROJECT BUDGET – Financial (Cash) and Non-financial (In-kind) Components

**\*\* NB Budget not required for in-kind applications \*\***

Please note: If you are not GST registered, amounts should include GST as this is part of the cost of the project. Amounts should be exclusive of GST if you are registered for GST.

Income	\$	Expenditure	\$
Volunteer labour (\$25 per hour non skilled / relevant rates for professional services) (IK)		In-kind labour (IK)	
Donated goods /services (IK)		In-kind goods/services (IK)	
Donation – cash		Advertising/Promotion/Marketing	
Sponsorship		Facilitators/Instructors	
Own cash		Other:	
Sales – tickets, enrolment, workshop fees		Other:	
Other Grants – Fed/State/Philanthropic		Other:	
<b>Council Financial Assistance</b>		Other:	
<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>

## SECTION 6 - CERTIFICATION

- The statements in this application are true and correct to the best of my knowledge, information and belief.
- I certify that I have the appropriate delegation, as authorised by the applicant, to prepare and submit this application on behalf of the applicant.
- I agree to provide Douglas Shire Council with any additional information required to assess this application.
- I understand that Douglas Shire Council does not accept any liability or responsibility for the proposal in the application.
- I understand that if Douglas Shire Council approves the application, I will be required to accept the terms and conditions of the Council Grants Program.
- I consent to the media being given information if this application is approved and understand media may contact me.
- I consent to the project being published on Council's website, in promotional material or by way of civic and/or legislative requirements if this application is approved.
- I agree to ensure all necessary approvals, permits, insurances, licenses and qualifications are obtained prior to the project, program or event taking place and abide by all relevant health, safety, and professional and industry standards.
- I will obtain a certificate of currency for public liability insurance and any other appropriate insurances, for an appropriate amount (in total and per event) based on level of risk current to cover the proposed project.

<b>Signature:</b>		<b>Date:</b>	
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<b>Full Name:</b>	
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Note: If you are under the age of 18, your legal guardian must also sign this application

<b>Guardian Signature:</b>		<b>Date:</b>	
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<b>Guardian Full Name:</b>		<b>Date:</b>	
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<b>Position in group or organisation: (if applicable)</b>	
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### **Douglas Shire Council – Information Privacy Statement**

Your personal information has been collected for the purpose of assessing your Application for Approval. The collection of your information is authorised under the Local Government Act 2009. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the Information Privacy Act 2009 and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law.

**SECTION 7 - SUPPORT MATERIAL****APPLICANT SUPPLIED**

Please attach documentation to demonstrate need, demand, support or benefit of project.

Quotes - attach one quote for items over \$500 to less than \$5,000 (GST Exc), two quotes for items \$5,000 to less than \$15,000 (GST Exc) and three written quotes \$15,000 to less than \$200,000 (GST Exc).

Letters of support

Meeting minutes

Survey results

Photos

Project Plan

Property Owner Approval

Other documentation – Please list