

Community Grants Program 2010-11

Application Form

Community Strengthening

Small grants up to \$5,000 and Large grants up to \$10,000

Applications close 5:00 pm Monday 16th August 2010



Please read the Community Grants Program Guidelines before you complete this application form.

All groups are advised to discuss their applications with a Council officer prior to completing this application form. Contact telephone numbers are listed in the guidelines.

Name of Council Officer: _____ Department: _____

Which grant are you applying for? (Please tick)

Small Grant up to \$5,000

Large Grant up to \$10,000

How much are you requesting in this application? \$ _____

1. Organisational details

Contact person completing this application

Title: _____ First Name: _____ Last Name: _____

Position held _____ Telephone (day) _____ (after hours) _____

Fax _____ Mobile _____ Email _____

Name of your group or organisation _____

Mailing Address _____

Suburb _____ Postcode _____

Meeting Address (if different from above) _____

Suburb _____ Postcode _____

Insurance number _____ Expiry Date _____

Australian Business Number (ABN) _____

Is your group incorporated? (Please tick)

Yes Incorporation number _____

No

If you answered **No** it is advisable that you arrange for an auspice organisation for this application. You will need their permission, their contact details and the signature of an authorised person for this application. If you are successful the payment will be made to the auspice group

Name of the auspice organisation _____

Title: _____ First Name: _____ Last Name: _____

Position held _____ Telephone (day) _____ (after hours) _____

Fax _____ Mobile _____ Email _____

Mailing Address _____ Suburb _____ Postcode _____

Incorporation number _____ Australian Business Number (ABN) _____

Insurance number _____ Expiry Date _____

Please complete the following if you received a Brimbank Community Grant in 2009/10:

Have you returned the evaluation and financial report back to Brimbank Council for the 2009/10 Community grants? (Please tick)

Yes I am a new applicant

No (If you answered **No** you are not eligible to apply for a grant)

Current facilities

Which facilities do you currently use? (Please tick)

Council Community owned Privately owned

How much do you pay each year for the use of these facilities? \$ _____

Please provide the name and address of these rooms, halls or facilities?

Address _____

Suburb _____ Postcode _____

Are you expecting to receive any other funding to support this application from any other funding organisations? (Please tick)

Yes No

If Yes, how much are you expecting to receive? _____

2. Your Project or Activity

Project name _____

What activity or project are you applying for? (50 words only)

Commencement date _____ Completion date _____

Is this a new project or activity for your group? (Please tick)

Yes No

Where will your project or activity be held?

Location _____ Postcode _____

Will you charge a fee or ask for a contribution for this activity?

Yes No (Please tick)

If **YES** how much will you charge? \$ _____

3. Council priorities

Please place a next to the Strategic Direction that is relevant to your project or activity.

1. Community Wellbeing	2. Sustainable Environments	3. Urban Design and Infrastructure	4. Council and the Community Working Together
<input type="checkbox"/> 1. Making Brimbank's diverse community feel welcome and to participate and become involved in their neighbourhoods <input type="checkbox"/> 2. Celebrating Brimbank's history, diversity, creativity and identity through community activities <input type="checkbox"/> 3. Creating a community where people are healthy and feel safe <input type="checkbox"/> 4. Supporting learning initiatives for people of all ages <input type="checkbox"/> 5. Supporting the growth of the local economy	<input type="checkbox"/> 1. Supporting initiatives that save energy, water and increase recycling <input type="checkbox"/> 2. Improving and protecting Brimbank's natural environment	<input type="checkbox"/> 1. Supporting initiatives that encourage the community to travel around local neighbourhoods <input type="checkbox"/> 2. Supporting initiatives that increase the pride and character in Brimbank <input type="checkbox"/> 3. Providing and enhancing places for people to play, relax and meet in their neighbourhoods	<input type="checkbox"/> 1. Increasing community leadership skills through training and skills development <input type="checkbox"/> 2. Working together to share ideas, make plans and implement new initiatives

Please refer to the Brimbank Community Plan at www.brimbank.vic.gov.au if you require further information on the plan.

Example only: If you are applying for funding to hold a series of information and exercise workshops for your members you need to provide a in the first column.

1. Community Wellbeing

3. Creating a community where people are healthy and feel safe

Describe your project or activity (200 words only)

How will your project or activity achieve the strategic direction that you identified in the Strategic Direction on page number 3? (200 words only)

How do you know that there is a need for your project or activity? (200 words only)

Describe how other groups or organisations will be contributing to this project or activity? (200 words only)

Please describe the major benefits of your project or activity for the Brimbank community? (200 words only)

Please explain how your project or activity will be inclusive of people of all abilities and backgrounds? (200 words only) e.g. disadvantaged groups

How will you know that your project or activity has been a success? (200 words only)

4. Project Plan

Please complete the following plan showing the important steps that you will take to make sure that your project or activity will be a success

Important Stages	Responsible Person / People	Start and Completion Dates

6. Certification

To be completed and signed by an authorised member of the group:

I certify that all details supplied in this application form and in any attached documents are true and correct to the best of my knowledge:

(Please tick if you agree)

- I am authorised by the group to sign this certification
- I will contact Brimbank City Council immediately if any information provided in this application changes

- I acknowledge that if I am awarded a grant under this program, that I will comply with all regulations, by-laws, insurance and permit requirements
- I agree to have the organisation or groups name, project and amount funded published

Name _____

Position in organisation _____

Signature _____

Date _____

7. Only for groups requiring an auspice organisation

To be completed and signed by an authorised member of the auspice organisation

Name _____

Position in organisation _____

Signature _____ Date _____

8. Privacy Statement

Council is committed to protecting the privacy of personal information it holds. Any personal information collected is used for the purpose of administering Council's grants program, including an assessment of whether the applicant is eligible for funding, subsequent evaluation of a funded activity, and the auditing of grant funds (which may be undertaken by or on behalf of Council or any government inspection agency). It may also be used and disclosed as required or permitted by law. You may access your personal information by contacting Council's Privacy Officer. If you do not provide all of the information requested, your application will not be processed.

Applications open

Monday 5th July 2010

Applications close

5:00 pm Monday 16th August 2010

Return completed applications to	Community Grants Community Planning and Development Department Brimbank City Council PO Box 70, SUNSHINE VIC 3020
Emailed to	communitygrants@brimbank.vic.gov.au
Hand delivered to	Customer Service Centre Harvester Building 301 Hampshire Road, Sunshine (Next to the Sunshine library) Or Old Keilor Highway, Keilor Customer Service Centre Brimbank City Council
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Applications close	Monday 16th August 2010 at 5:00 pm