Form Preview

ORGANISATION DETAILS

* indicates a required field

Before You Start

Before you complete this form, it is important that you read the <u>Community Grant guidelines</u> and <u>Council's Grants policy</u>.

If you need advice or are having difficulty completing or submitting this form or attaching documents, please refer to the <u>Help Guide for Applicants</u> or contact the Grants Team via email communitygrants@casey.vic.gov.au

Collection Statement

City of Casey (Council) is collecting your personal information through this Grant Application Form to assess your application for grant funding. Personal information will only be collected if you give your consent at the time we collect the information from you unless an exception in the Privacy Act applies or is required by law. The personal information requested on this form is being collected by Council for the purposes of confirming applicant eligibility, for grant assessment panels and for grant allocation to successful applicants. The application including personal information collected may be disclosed to other Council departments for the purposes of assessment of this and other applications or requests for support to Council from this applicant as part of the applicant's funding record. General information (excluding personal information) may be used for publication such as the applicant's name, project details and funded amount on the City of Casey website and in Council reports such as evaluation reports and social and economic impact assessments to inform program improvements and policy decisions. If you wish to gain access to the information provided or amend any of the personal information you have supplied to Council, please contact Council via telephone on 9705 5200. Council will not be liable for the copy or misuse of the information contained in this feedback form.

I understand and agree to Council's collection statement * ○ Yes

Privacy Statement

City of Casey is committed to protecting your privacy. Your personal information will be handled in accordance with the Privacy and Data Protection Act 2014. All personal information collected by the City of Casey will only be used for the purposes outlined within our Collection Statement. Councils Privacy Policy is available from our website Privacy Policy | City of Casey and all Council Customer Service Centres. For further Information about how Council manages and uses your personal information or how you can access and/or amend your personal information please contact Councils Privacy Officers via our website Leave-your feedback form | City of Casey or by calling on 9705 5200.

Organisation Details

Organisation name *

Postal a Address	ddress *	•					
Suburb	State	Postcode	2				
Website							
Regular	meeting	location) *				
Please pro	vide a full	address or	facility	name			
Is this a ○ Yes	Council	manage	d facili			○ Un	sure
Contact	Perso	n					
Who is th	e main c	ontact per	rson noi	minated b	y your organi	sation for	this project?
Name * Title	First N	Name		Last Nam	ne		
Position							
Mobile p	hone nı	ımber					
	_	_	_				
Alternate	e phone	number	*				
Email ad	dress *						
This email	address v	vill be used	for post	ing corresp	ondence relat	ing to the g	grant application.

Organisation Endorsement

Please list the name of one other committee/organisation member who has knowledge of this application and approves of the application being made.

Endorsed						
Title	First Name	Last Nam	е			
Position						
Phone nur	nber *					
Endorser a	address					
ORGANI	SATION DETAILS	continu	ed			
* indicates	a required field					
Legal Sta	atus					
What is vo	our organisation's leg	al status?) *			
Incorpor			Trust		h:-	_
CharityCompan	y limited by guarantee		UnincorpOther:	orated wit	n an auspice	e
0. 6	#0					
○ Coopera	tive					
If incorpor	rated, please provide	incorpor	ation numbe	er		
	Insure of your incorporations in the incorporated in the incorpora					
ABN						
Does vour	organisation have ar	n Australi	an Business	Number	(ABN)? *	
○ Yes	have an ABN, you will be		○ No			o if this grant
	s successful. Grants Officer				Supplier form	r ir tilis grafic
If yes, wha	at is your ABN? *					
	ovided will be used to lo you have entered the Al			ormation. (JICK Lookup	above to
	from the Australian Busine	ess Register				
ABN						

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Entity name ABN status

Entity type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

More information

ACNC Registration
Tax Concessions

Main business location

Auspice Information

If your group is unincorporated, you will need to negotiate an auspice agreement with an incorporated organisation to receive and hold the funding for you and to support you to deliver this project. An information sheet about auspicing is available here.

You MUST obtain permission from an organisation to nominate them to act as an auspice for this application before providing their details below.

Auspice organisation name *	
Auspice incorporation number	*

Auspice Australian Business Number (ABN) number *

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 <u>More information</u>

ACNC Registration
Tax Concessions

Main business location

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Please attach a copy of the auspice organisation's Certificate of Currency for public liability insurance (mimimun \$20,000,000) * Attach a file:
Auspice organisation contact person * Title First Name Last Name
Auspice contact phone number *
Auspice contact email *
Please upload evidence of support from the auspicing organisation * Attach a file:
You must provide confirmation of auspice support. This can be a letter, an agreement, or copy of an email.
Insurance
To apply for this grant, your organisation must have public liability insurance of a minimum \$20 million.
What is the amount of your Public Liability Insurance coverage? *
\$
Please attach a current copy of your Certificate of Currency * Attach a file:
Important note: a tax invoice or expired public liability insurance certificate will not be accepted.
ORGANISATION DESCRIPTION
* indicates a required field
Organisation Description
Provide a short description of your organisation and what you do. *
Word count: Must be no more than 200 words

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In which year was your organisation established?
How many members in your organisation? *
Members are individuals that belong to your group. They may be participants, committee members or volunteers but are not paid staff.
How many members live in the City of Casey? *
The City of Casey is committed to reducing harm caused by gambling and responding to and preventing gambling-related issues. Projects that are supported by gaming venues or facilities with electronic gaming machines (EGMs) or held in venues where there are EGMs cannot be funded through this grant program. Does your organisation receive any funding (including sponsorship) or have any
association with the gambling industry or venues where there are electronic gaming machines? * O Yes No
If yes, please detail further.
PROJECT DETAILS
* indicates a required field
Funding Request
Which category does your project best fit? * O Arts and culture O Diversity and harmony O Environmental sustainability You can refer to the grant guidelines to learn about the categories: https://www.casey.vic.gov.au/community-grants
Project Details
What is the name of your project? *
Must be no more than 20 words.
Describe your project. *

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Include a short summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform or the event you will hold), and what effects you expect to result from your activities (outcomes). Go to the Funding Centre's Answers Bank at https://explore.fundingcentre.com.au/help-sheets/answersbank#Qu1 if you need some ideas about how to frame your response.

	ortant note: You must confirm any facility/ nis project with the relevant Council team. king request). *
Maximum 25 words. It is helpful if you include the	suburb in your answer.
Anticipated start date *	
•	
Must be a date and between 1/7/2025 and 30/6/20 For one day events, please use the event date as	
Anticipated finish date *	
Must be a date and no later than 30/6/2026.	
If you have already discussed your proje you speak with?	ect with a Council staff member, who did
•	
Criteria 1 - How much the commun	nity needs the project
Which of Council's community grant pric ☐ Innovative and of a high quality programs and events ☐ Council's community grant price.	☐ Locally led projects with community support
and social inclusion across Casey	e □ Celebrates diversity and cultural heritage
 □ Increases opportunities for community participation and education □ Promotes sustainable living practices 	 □ Enables the community to share in the benefits of digital technology □ Support Council's plans and strategic
☐ Helps residents to be healthy, active and	objectives
engaged in community life	
Select at least one choice.	
How will it meet these priorities and wh	at will it achieve? *
Describe three things you want the project to achi (200 words recommended)	eve in terms of benefits for participants or others

Why is this project needed? What evidence supports this? E.g. anecdotal or statistics. *

	Number of male participants Estimate only.	Number of non-binary participants Estimates only		
Please include your group volunteers, not paid staff				
		tendees, committee members and		
What is the approxima in this project?	te number by gender of p	eople who will directly participat		
	enefit from the program/event.	estions. Please choose only the main If it's open to everyone, choose the first		
·	primary beneficiaries of the			
☐ Flyer/Newsletter Council can help to promote www.casey.vic.gov.au/supp	community events. For more intoort-we-provide-your-event	formation go to: https://		
☐ Website☐ Social media☐ City of Casey Event Ca	□ News	□ Word of mouth□ Newspaper/Radio□ Other:		
How will you promote *	the project and encourage	e people to attend or participate?		
Who will this project bJust members of yourThe Casey communityBoth your members a	organisation	unity		
Criteria 2 - How mu	ch the community will	benefit from the project		
This project will improThis project will improThis project will impro	ove people's personal wellbeir ove people's sense of safety ove people's connection to oth			
Describe the specific proble 100 - 200 words recommend	ded.	How do you know there is a the problem		
Word count:				

Who has helped you to design or plan this project? *

This number/amount is calculated.

Criteria 3 - How involved the community is in the project. This includes leaders, partners, participants and spectators.

Must be a series there 100 weekle
Must be no more than 100 words. For example, committee members or volunteers, people with lived experience, feedback from community members, partner organisations
Who will help you to deliver this project and how will they be involved? *
Must be no more than 100 words. For example, committee members or volunteers, staff or contracted professionals, other community organisations or Clubs.
How will you make the project as accessible as possible? For example for people of different genders, people who speak different languages, or people with different abilities. *
Must be no more than 100 words.

Some examples of ways to make a program/event more accessible are:

- choose an indoor venue that has wheelchair access or an outdoor venue that has a firm and level ground surface
- provide adequate seating and allocate spaces for wheelchairs and prams
- cater for different dietary requirements and preferences
- consider audio documents for people who have a hearing impairment
- consider printed promotional materials in <u>Easy English</u> and use fonts and colours that are easy to read
- ask people if they have any access or communication requirements and try to cater for these
- use interpreter services if needed, so that people who speak a language other than English can participate.
- consider how caregiving responsibilities might impact participation
- consider ways to make people of all genders feel welcome and safe

Criteria 4 - How well your group or organisation can budget for and deliver the project.

Now that we know about your project, we want to find out more about your organisation's ability to undertake what you propose. Please provide some information about your organisation that will give us confidence that you can deliver the project described in this application

Describe the structure of your group/organisation, including the roles of committee members, volunteers and any paid staff. *
Tell us about your previous experience in delivering similar projects. *
Must be no more than 150 words.
What types of evidence will you use to evaluate your project to make sure that it has achieved the outcomes you are seeking? *
☐ Verbal or written feedback from participants (comment boards, emails, social media comments)
 □ Participation or attendance logs (number of people, demographics such as gender, age group, cultural background, suburb) □ Feedback forms, surveys, questionnaires □ Interviews, focus groups, round table discussions □ Observations □ Measure changes in knowledge/skills (quizzes, tests) □ Other:
At least 1 choice must be selected.
How will you know if this project is successful? What will success look like for your organisation or community? *
Must be no more than 150 words.
PROJECT BUDGET

* indicates a required field

How much funding are you requesting? *

Minimum \$1,000, maximum \$5,000.

Preparing your project budget

Your project budget explains exactly what the grant money will be used for. The budget includes details of all money that will contribute to the project (income) and all the cost of all the items required for the project (expenditure).

Hints for making a good project budget:

- Clearly explain and provide specific details for each item in separate lines
- Obtain and attach quotes or pricing, especially for larger items

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- List all forms of funding/income contributing towards your project, including sponsorship, sales, membership fees or entry fees
- Don't over or underestimate your projects costs
- The income total and the expenditure total must be equal

If your budget is unclear or includes unexplained items, the grant assessors will be unable to understand what you intend to spend the grant money on and will likely impact on the assessment of your application.

In-kind support refers to any non-cash support towards your project. This may be in the form of donations of services or goods (e.g. donated catering, donated time from a professional or free equipment hire). In this form, in kind support **MUST NOT** be included in the budget table. There is an opportunity to provide this information later.

Project Budget - EXAMPLE ONLY

Income Description

\$ dollar amount

Expenditure description

\$ dollar amount

City of Casey Grant

1200

Venue Hire for workshops (8 weeks)

800

Course fees (25 participants)

500

Newspaper advertisements x 3

360

Organisations contribution

140

Hire of audio visual equipment

480

Sponsorship (to be confirmed)

200

Workshop booklets - photocopying and binding

250

Catering (light supper)

150

TOTAL

2040

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Forr	ΗГ	ıev	

TOTAL 2040

Your project budget

Important tips for completing this budget table:

- 1.You **MUST** include the amount of funding you are requesting in the table under 'Income Description'. It **MUST** be the same amount that you entered for the question above.
- 2.Only use whole dollar amounts (no cents)
- 3.Total income **MUST**match total expenditure. Refer to example below.

Income description	\$ dollar amount	Expenditure description	\$ dollar amount
Include grant amount you hope to recieve			
Amount requested in this application	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget Totals

Total Income Amount	Total Expenditure Amount	Income - Expenditure	
\$	\$	\$	
This number/amount is	This number/amount is	This number/amount is	
calculated.	calculated.	calculated.	

In-kind support

In-kind support refers to any non-cash support towards your project. This may be in the form of donations of services or goods (e.g. donated catering, donated time from volunteers or a professional service, or free equipment hire).

To assign a dollar value to the volunteer labour that your project will require, you can use a simple **Cost of Volunteering calculator**.

Please include all in-kind contributions towards this project in the table below.

In-kind description	\$ dollar value	
Eg. volunteer hours, donated printing of flyers, donated venue hire	Estimates are accepted.	

Partial funding	
In some cases, the assessment panel n amount that i requested.	nay decide to recommend only part of the funding
Will you accept a funding amount this project? *	that is less than what you have requested for
○ Yes	O No
Why can't you accept a partial amount	ount? What will be the impact on your project i that is requested. *
place? * \$ The minimum amount that will be funded is	
If you received only part of the fun you need to make to deliver your p	iding you have requested, what changes would project, if any? *
OUTDOOR EVENTS	
Approval Application Form. For more in	oor activities, you may need to complete an Event formation, visit Host Event Casey or email the City ey.vic.gov.au to discuss your project, including any need to safely run your event.
Will your project involve any of the ☐ Temporary structures such as marc rides, jumping castles, or shade structu ☐ Road closures or use of public car p	quees, stages, fencing, portable toilets, amusement ures

DECLARATION

Bunjil Place)

☐ Fireworks, firecrackers or pyrotechincs☐ Alcohol (serving, sale or consumption)

☐ Filming the event in a public space or playing music/singing in a public space (including

If you have already contacted Council's Events Team, who did you speak with?

*	ind	icates	2	requi	rod	fial	Ы
111	IIIu	icates	a	reaui	rea	ne	IU

Other grant opportunities

The City of Casey provides information to community groups about upcoming grant opportunities.

You can sign up to our monthly Grants Update email newsletter which contains information about a wide range of funding opportunities for community organisations. Go here to sign up: https://www.casey.vic.gov.au/sign-up-grants-update-e-newsletter. You can unsubscribe at any time.

Declaration		
I hereby make this application for a City of Casey Community Grant on behalf of my organisation and am authorised to do so. * ○ Yes		
I affirm that all of the details in this app correct to the best of my knowledge. * ○ Yes	lication and attachments are true and	
Council's Grants Policy, including that if	ns outlined in the Grants Guidelines and this application is successful an acquittal he project, or by 30 June 2026, whichever	
I give permission for Council Grants Officers to share my contact details with other Council Officers (who may wish to contact you about other Council or community opportunities)? *		
○ Yes	○ No	
Name of person completing declaration	and giving permission. *	
Email address of person completing dec	laration and giving permission. *	
Must be an email address.		