

Casey Food Relief Capacity Building Initiative - Application Form

Form Preview

Application details

* indicates a required field

Before You Start - Quick Checklist

Please check the points below before you begin your application.

Eligibility

We provide food relief services in the City of Casey Our project meets the grant guidelines (equipment, systems, volunteers, or access improvements) Our project is not linked to gambling venues or electronic gaming machines We have public liability insurance If we are not incorporated, we have an auspice organisation

Information you will need

Organisation details (name, address, contact person) ABN (if your organisation has one) Name and contact details of a second person who approves this application Basic details about your food relief service (e.g. who you support, how often, how many people)

Project details

A short description of your project What problem you are trying to help with What you want to improve or change Where and when your project will happen

Budget and documents

A simple budget (income and expenses must match) Quotes or supporting documents (if available) Certificate of Currency for public liability insurance (current) Auspice documents (if applying with an auspice)

Tips for completing this form

- Dot points are OK
- Keep your answers short and clear
- If you are unsure about anything, email the Grants Team at 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

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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 *

Organisation primary address *

Address

Suburb State Postcode

Website

Regular service location/s (where food is distributed) *

Please provide a full address or note 'as above' if it is the same as your organisation's primary address

Contact Person

Who is the main contact person nominated by your organisation for this project?

Name *

First Name

Last Name

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Position *

Phone *

Email *

This email address will be used for all correspondence relating to this 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.

Endorser *

First Name

Last Name

Position *

Phone *

Email *

About your organisation

* indicates a required field

What is your organisation's legal structure? *

Incorporated

Cooperative

Company limited by
guarantee

Charity

Trust

Unincorporated
with an auspice

If incorporated, please provide the incorporation number

If you are unsure of your incorporation number, go to: <https://www.consumer.vic.gov.au/clubs-and-fundraising/incorporated-associations/search-for-an-incorporated-association>

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ABN Number?

Does your organisation have an Australian Business Number (ABN)? *

Yes No

If you do not have an ABN, you will be required to complete a Statement by Supplier form if this grant application is successful. Grants Officers will contact you if this applies.

ABN Lookup

If yes, what is your 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	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

Auspice (if applicable)

An auspice is another incorporated organisation that agrees to receive and manage the grant funds on your behalf.

In which year was your organisation established?

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	
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ABN
Entity Name
ABN Status
Entity Type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type [More information](#)
ACNC Registration
Tax Concessions
Main Business Location

Please attach a copy of the auspice organisation's Certificate of Currency for public liability insurance (mimimun \$20 million) *

Attach a file:

Auspice organisation contact person *

First Name

Last Name

Phone *

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 funding, your organisation must have public liability insurance of a minimum \$20 million.

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.

Reducing harm caused by gambling

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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? *

- Yes No

If yes, please detail further.

About your organisation

* indicates a required field

What does your organisation do? *

Word count:

Must be no more than 100 words

Describe your food relief service. What type of food support do you provide (eg. pantry, meals, vouchers). How often do you provide it? *

Word count:

Must be no more than 100 words.

Who do you mainly support? *

Select from the drop list the main group/s that benefit from your food relief service.

How many people do you currently support with food relief? Include an approximate number per week/month. *

How would you rate your organisation's current capacity to meet demand for food relief? *

- Strong (meeting demand well)
 Moderate (meeting some needs)
 Limited (often struggling)

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How confident are you that your food service can keep operating at current demand? *

- Very confident
- Somewhat confident
- Not very confident

Number of active or regular volunteers that support this service *

Do you currently have enough volunteers to run your food service effectively? *

- Yes
- Sometimes
- No

How well do your current systems support your service? (e.g. equipment, rostering volunteers, tracking who you support, or organising food distribution) *

- Very well
- Mostly well
- Somewhat
- Not well

In your experience, how easy is it for people to find your service? *

- Very easy
- Somewhat easy
- Difficult
- Very Difficult

How often do people seem unsure about how to access food relief or other services? *

- Often
- Sometimes
- Rarely
- Never

Approximately how many people using your service are first-time users each week/month? *

- None
- A few (1-5)
- Some (6-20)
- Many (20+)

What makes it hard for people to access your service? Select all that apply. *

- | | |
|---|--|
| <input type="checkbox"/> Language barriers | <input type="checkbox"/> Accessibility needs (eg. disability, mobility issues) |
| <input type="checkbox"/> Not knowing where to go | <input type="checkbox"/> Long waiting times or high demand |
| <input type="checkbox"/> Limited awareness of services | <input type="checkbox"/> Eligibility criteria or strict requirements |
| <input type="checkbox"/> Transport or distance | <input type="checkbox"/> Limited service hours |
| <input type="checkbox"/> Cultural barriers | <input type="checkbox"/> Childcare or family responsibilities |
| <input type="checkbox"/> Stigma or discomfort asking for help | <input type="checkbox"/> Other: <input type="text"/> |

About your project

* indicates a required field

What are you requesting funding for? Tick all that apply. *

- Equipment
- Technology or systems
- Volunteer support
- Access or inclusion improvements
- Other:

Short description of your project. *

Word count:

Must be no more than 50 words.

Describe the equipment, system or activity.

Where will the project be delivered or take place? *

Include location

When will the project start and finish? Must be completed by 30 June 2027. *

Include approximate dates for the main steps in your project. Dot points accepted.

Community Need

What problem are you trying to help with? Explain the food relief need in your community. Include who needs support and where they are located. *

Word count:

Must be no more than 100 words.

What is missing or needs to improve in your service? *

Word count:

Must be no more than 100 words.

For example: not enough storage, not enough food, volunteer challenges, limited access for some people, local coordination, limited opening hours

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Why is this funding needed now? *

Word count:

Must be no more than 100 words.

Community Benefit

How will this project improve food relief services? For example: increase capacity, improve safety, reduce service barriers, improve data or logistics *

Word count:

Must be no more than 100 words.

What are the long-term benefits? For example: ongoing use of equipment, stronger partnerships, better emergency planning *

Word count:

Must be no more than 100 words.

Will you work with other organisations? *

Yes

No

Working with other organisations is encouraged and may strengthen your application.

If yes, who and how?

Will this grant help to make your service accessible to more people or different communities? *

Word count:

Must be no more than 100 words.

Explain any steps you will take to reduce barriers such as language, culture, physical access.

Organisational Capacity

What experience do you have delivering food relief? *

Word count:

Must be no more than 100 words.

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Who will deliver this project? Describe roles of staff and volunteers. *

Word count:

Must be no more than 100 words.

What could go wrong and how will you manage it?

Word count:

Must be no more than 100 words.

How will you know if this project has made a difference? Tick all that apply.

- Tracking how many people you support
- Tracking how many people use your service for the first time
- Observing improvements in how your service operates (e.g. capacity, coordination)
- Feedback from people accessing food relief
- Feedback from volunteers or staff
- Other:

Your budget

* indicates a required field

Funding Request

How much funding are you requesting? *

\$

\$1,500 - \$20,000

Your project budget clearly explains how City of Casey grant funding will be used.

It must show:

- All income that will support your project
- All project costs required to deliver the activity

Some costs are not eligible to be funded through grants. These are outlined in the grant guidelines.

If your project includes ineligible expenses, you can still proceed but these costs must be covered by your own financial contribution or other income sources.

Budget tips

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- Start with a clear project plan so you understand everything you need to deliver this project
- List each income and expense item on a separate line - indicate when income is not yet confirmed
- Provide detailed descriptions for each expense item so assessors understand what you are funding
- Include all funding sources contributing to the project, not just the Casey grant
- Only include income and expenses that relate directly to this project
- Avoid overestimating or underestimating costs
- Make sure the total income and total expenditure **are exactly the same**

Example budget (sample only) Project: Expanding pantry storage and improving volunteer support and coordination

Income	\$ Amount	Expenditure	\$ Amount
City of Casey Grant	10,000	Commercial fridge (for food storage)	4,000
Organisation contribution	1,500	Shelving and storage containers	2,000
Donation from local business	1,000	Laptop and simple database system	2,500
Volunteer training (food safety + admin)	1,200		
Volunteer wellbeing program (workshops + resources)	800		
Translation of information materials	1,000		
Project coordination (short-term support)	1,000		
Total income	12,500	Total expenditure	12,500

Your budget

Income description \$ dollar amount Expenditure descrip \$ dollar amount
tion

Income description	\$ dollar amount	Expenditure description	\$ dollar amount
Include grant amount you hope to receive			
City of Casey Grant	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget totals

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Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

Supporting information

Upload quotes, photos or design plans, supporting letters or related documents here:

Attach a file:

In-kind support

In-kind contributions are non-cash support that helps your project. This may include donated goods or services such as:

- Volunteer time
- Facilitator, trainer, or specialist fees
- Project coordination
- Discounted or free equipment or services

Will your organisation provide or receive in-kind contributions? If yes, detail below.

Declaration

* indicates a required field

I hereby make this application for a City of Casey grant on behalf of my organisation and am authorised to do so. I affirm that the details in this application and attachments are true and correct to the best of my knowledge. I also agree to adhere to the conditions outlined in the Grants Guidelines and Council's Grants Policy, including that if this application is successful an acquittal must be completed within 60 days of completion of the project, or by 30 June 2027, whichever is earlier. *

Yes

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. *

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Email address of person completing declaration and giving permission. *

Must be an email address.

Future grant opportunities

The City of Casey provides regular 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.