

Recreation Development Grant Application Form 2020

Form Preview

Your Details

* indicates a required field

You are required to provide information about your organisation and your project. The contact information provided will form part of your funding agreement and all future correspondence for this funding round if you are successful.

Applicant

Applicant Organisation *

Organisation Name

Applicant Postal Address

Address

Application Contact

Application Contact *

Title First Name Last Name

Application Contact Position *

Application Contact Mobile Phone Number *

Must be an Australian phone number.

Application Contact Primary Email *

Must be an email address.

Authorised Signee

Is this application contact an Authorised Signee? *

- yes
 no

An Authorised Signee is someone who is authorised to sign funding documents on behalf of the organisation

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Authorised Signee 1

Authorised Signee 1 *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorised Signee 1 Position *

Authorised signee must be either a President, CEO, Director, Secretary, Treasurer or a Senior Role within the applicant organisation.

Authorised Signee 1 Mobile Phone Number *

Must be an Australian phone number.

Authorised Signee 1 Primary Email *

Must be an email address.

Authorised Signee 2

Authorised Signee 2 *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorised Signee 2 Position *

Authorised signee must be either a President, CEO, Director, Secretary, Treasurer or a Senior Role within the applicant organisation

Authorised Signee 2 Phone Number *

Must be an Australian phone number.

Authorised Signee 2 Primary Email *

Must be an email address.

Remember! Save your application before moving to next page.

Auspice Details

* indicates a required field

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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	

Attach Public Liability Insurance Certificate (minimum \$10million)

Attach a file:

Incorporation, ABN and Insurance (Auspicing Organisation)

Being Auspiced? If you have nominated an auspice organisation, enter their details in this section.

Incorporation Number *

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	

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ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Attach Public Liability Insurance Certificate (minimum \$10million) *

Attach a file:

Remember! Save your application before moving to next page.

Project Details

* indicates a required field

How this section will be assessed.

The following section/s are assessed using the [Assesment Criteria](#) found in the grant guidelines.

Project Aim and Benefits

Project Title *

Brief Description of Project *

Tell us exactly what you are going to do.(Must be no more than 100 words).

Aim of project: *

- Up-skill members
- Enhance recreation activities
- Maintain or increase participation levels
- Offer a new recreation opportunity
- Other

(Tick all that apply).

How will your project achieve the above aim/s? *

(Scored out of 10). Provide details for each aim ticked.

Will other groups or individuals benefit from this project? *

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Yes

(If yes, outline details below).

No

Who else will benefit and how?

(Scored out of 10). Who are the beneficiaries? Is it your club members, other users of the facility or will the project attract new members to your club or users of the facility?

Participation and Access

Will your project contribute to increasing participation rates in sport and recreation activities? *

Yes

(If yes, outline details below).

No

How will your project contribute to achieving this?

(Scored out of 10). Will the project attract new members to your club or a new competition?

Will your project increase access to a diverse range of quality sporting and recreation facilities, programs and opportunities? *

Yes

(If yes, outline details below).

No

How will your project contribute towards this?

(Scored out of 10).

Social inclusion

Being 'inclusive' means welcoming everyone - regardless of age, gender, race and ability and that all people involved have an equal opportunity to participate at a level they choose.

What policies and strategies do you have that ensures you are offering a welcoming environment for everyone?

When answering this question, consider what strategies you have in place to engage with our diverse community including, but not limited to, juniors/youth, seniors, the Indigenous community, the CALD community and/or other specific groups.

How does your project address social inclusion? *

(Scored out of 10). This is about the project not what your organisation is already doing.

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Strategy and Plan Alignment

In this section you must identify how your project aligns with your Organisations Strategic Plan and/ or Council's [Recreation Strategy](#).

Does your project align with the priorities or principles identified on pages 10 or 11 of Council's Recreation Services Strategy? *

Yes No

(If yes, outline details below).

(Scored out of 5).

Remember! Save your application before moving to next page.

Budget

* indicates a required field

Instructions

Your budget is an important part of your grant application and will be assessed using the [Assesment Criteria](#) found in the grant guidelines.

To assist you to complete your budget correctly we have developed [Budget Instructions](#) for you, including:

- What is project expenditure and income?
- How to complete your budget
- Budget examples
- What is and how do I calculate in-kind contributions?

Project Costs (Expenditure)

- List **all costs** associated with your project.

Item	\$ (GST inclusive)
	\$
	\$
	\$
	\$
	\$

Quotes

Remember!

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- Two quotes must be provided for any single expenditure item of \$1,000 or greater.
- Quotes must be less than 3 months old.

Item	Quote

Project Income

- Your Expenditure and Income **TOTALS must match**.
- Your contribution must meet the required \$2 for \$1 funding ratio applicable to this grant.
- **In-kind contribution cannot exceed** 50% for projects totalling \$1,500 or less and 25% for projects totalling \$1,501 or more.

Income Source	\$
Mildura Rural City Council Grant (GST exclusive)	\$
Your organisation's cash contribution	\$
In-Kind Contribution	\$

Grant Amount Requested

Total Amount Requested *

\$

(What is the total financial support you are requesting in this application?)

Applicant Declaration

* indicates a required field

Further Information

Additional information and / or documentation in support of your project (eg. site plans / drawings, photos, letters of support etc) can be uploaded below.

Attach a file:

Our Privacy Statement

Mildura Rural City Council collects Personal and/or Health Information for municipal purposes as specified in the *Local Government Act 1989*. The information collected in this form is used only for the purposes specified (primary purpose) and is not passed on to third parties. Council may disclose this information but only if authorised or required

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by law. Council may not be able to process your request unless sufficient information is given. Should you need to change or access your personal details, or you require further information regarding Council's Privacy Policy please contact Council's Privacy Officer.

Acceptance of Privacy Statement * Yes

Applicant Declaration

I, the undersigned, certify that I have been authorised by my Organisation and Auspice Organisation (if applicable) to submit this application.

I have read, understood and agree to the terms and conditions of this grant.

I have completed all sections of the applicaiton and to the best of my knowledge all the information I have given is true and correct.

I agree that Mildura Rural City Council, for the purpose of assessing this applicaiton, may check any of my statements.

I understand that this is an application and may not necessarily result in funding approval.

Acceptance of Declaration *

Yes

Full Name *

Position *

Date *

Must be a date

I would like to receive information about future grant rounds *

Yes

No