

2024/25 Community Grants Application Form

Form Preview

2024/25 Community Grants

Please read this section in full before starting your application.

It is important that you take the time to read through the [Community Grant Guidelines](#) before you begin your application.

If you are seeking in-kind support for a Council Venue please contact the Venues Team: venues@townsville.qld.gov.au before proceeding with this application.

About the Program

Community Grants create mutually beneficial agreements with local Not-for-profit or Auspiced Organisations to support the delivery of community outcomes for Townsville.

This program is focused on enabling successful activities through the provision of **one-off** funding.

Community Grants are most suited to community organisations that seek funding and/or in-kind support to conduct activities which align with the public interest and improve the quality of life for residents of Townsville.

You may be a recipient of a Community Grant and still apply for other Council grants, however in your application you must disclose all types funding and in-kind support your organisation is receiving from Council.

Program Objectives

The objective of this program is to identify, assess, and administer funds for activities that will achieve some or all of the below outcomes:

- Directly support at least one of [Council's Corporate Plan goals](#);
- Respond to a direct community need; e.g. fostering social connections, building cultural ties, sharing knowledge;
- Promote liveability and vibrancy of Townsville as a community through social, environmental, and/or economic activities; e.g. sporting events, regional attraction, community events;
- Build community expertise, capacity, skills and networks;
- Raise awareness of the Townsville region as a destination; e.g. tourism events, sporting events;
- Enhance community awareness of Council objectives and/or services.

Key Dates

Applications are open throughout the year and close 1 May annually. Applications for Activities will be considered until funds for Grants and Partnerships are exhausted.

You are encouraged to apply as early as possible to allow approximately 45 days for approval notification.

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You will be updated when the status of your application changes via the online application platform and email.

If your application is approved, and you have signed a funding agreement then you will need to send an invoice to Council to receive the funds. Note that the timeframe for the transfer of funds may vary.

Value of funding

Individual program activities can receive funding between \$250 to \$50,000 excluding GST.

Contact Information

General enquiries about the grant program should be directed to the Grants and Partnerships team by phoning 13 48 10 between 9am to 5pm Monday to Friday or emailing communitygrants@townsville.qld.gov.au.

Technical enquiries about SmartyGrants should be directed to SmartyGrants 03 9320 6888 between 9am to 5pm Monday to Friday or emailing service@smartygrants.com.au.

Privacy Notice

Townsville City Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which council manages personal information is governed by the *Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with *the Local Government Act 2009* for the purpose of administering the Townsville City Council Community Grants and Partnerships program. Generally, we will not disclose your organisational / personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our [Information Privacy Policy](#).

Eligibility

* indicates a required field

Eligibility Requirements

You will need to ensure that your Activity supports [Council's Corporate Plan goals](#). Council goals may change and be updated as required. Please visit Council's website to view the most current Corporate Plan.

Please note that satisfaction of the eligibility and application criteria does not guarantee that your application will be approved.

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Program

This field is read only.

Applicant Eligibility

Your organisation must meet all of the below requirements to be considered eligible:

- Is a Not-for-profit Organisation or is Auspiced by a Not-for-profit Organisation that is able to accept legal and financial responsibility for the project and its activities.
- Be a financially viable organisation;
- Reside and/or primarily provide services within the Townsville Local Government Area (LGA), or be able to demonstrate that the Activity promotes Townsville;
- Be free of debt to Council;
- Successfully completed Council's acquittal requirements from all prior activities funded by Council;
- Hold appropriate Public Liability Insurance per Activity;
- Submission of a complete grant application form, including provision of all relevant documentation;
- Not be an ineligible applicant. This includes:
 - Government departments and agencies, or education institutions.
 - Is in good repute with the community (in determining, whether the Applicant is in good repute, Council may consider complaints received from the community which prima facie are of concern to Council notwithstanding whether the claims have been substantiated).

Ineligible Items

Items that will not be considered for funding under this grant program include but are not limited to:

- Ongoing or general operating costs such as salaries and wages, electricity, lease/rent payments, insurance, uniforms or the like;
- Consumable items such as alcohol, fuel, food (including catering);
- Costs paid directly to applicant, applicant/organisation or auspice, including employee costs;
- Retrospective costs for items ordered, committed to, or purchased prior to funding approval and includes reimbursement of Council in-kind support;
- Money budgeted or set aside for contingencies or costs not yet incurred (i.e. allowances);
- Capital works such as costs of repairs, extensions or renovations to buildings;
- Capital equipment such as the purchasing of any items that have a lifespan beyond the Activity, including, but not limited to: whitegoods, office equipment, portable shade structures, machinery (mowers, vehicles and trailers etc.), signage, costumes, sheet music and furniture or the like;
- Prize money, prizes or trophies;
- Vouchers, inc. pre-paid or store cards;
- Payment of debts and loans;
- Allowance for in kind waste removal via Council Waste Services;

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- Fees for services, specifically associated with administration of the grant application and implementation Activity (i.e. grant writer or grant assistance fees, activity project management fees, auspice fees);
- A Duplicate Funding Activity.
- Non Economy Airfares.
- Accommodation costs that are not considered reasonable or proportionate to the Activity.

Ineligible Activities

Activities that will not be considered for funding under this grant program include but are not limited to:

- Activities which are considered to be a requirement under an existing agreement with another organisation;
- Activities which may result in indirect or direct discrimination of members of the community as contemplated within the *Anti-Discrimination Act 1991* (Qld) (the Act);
- For example:
 - An Applicant treating or proposing to treat a person less favourably because of age, race, impairment, sexuality, gender identity or religious activity amongst other protected attributes in the Act;
 - An Applicant imposes or proposes to impose a term to which individuals of a particular age, race, impairment, sexuality, gender identity or religious activity amongst others protected attributes under the Act are not able to comply and a higher proportion of people without the attribute comply or are able to comply.
- Activities which are not inclusive of all members of the community, do not benefit the community at large or benefit only a select group or class of people with particular value systems;
- Activities which may result in bullying or harassment of the community or select group of people;
- Activities that are considered to be the core responsibility of other levels of government, e.g. Queensland Government departments such as the Department of Education or Queensland Health.

All applications will be checked for eligibility. Applications will proceed to assessment if deemed eligible by Council.

Applicants: please note

Before completing this application form, you should have read the program guidelines: [Community Grants](#)

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is important that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact communitygrants@townsville.qld.gov.au.

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If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- You have read and understood the program guidelines
- You are able to demonstrate alignment between your project and the aims of this program and Townsville City Council's Corporate Goals
- Your organisation is a not-for-profit organisation (or auspiced by a not-for-profit organisation)
- Your organisation is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- Your organisation is located in and/or supplies services to Townsville City Council Local Government Area
- Your organisation is able to demonstrate financial viability
- Your organisation is free of debt to Council and does not owe any reports or money as a result of previous funding or grants
- Your organisation has the appropriate type and level of insurance for the Activities that are the subject of this grant
- Your organisation is not a government department / agency or a tertiary / education institution
- Is in good repute with the community
- In determining whether the Applicant is in good repute, Council may consider complaints received from the community which prima facie are of concern to Council, notwithstanding whether the claims have been substantiated

You must confirm that all statements above are true and correct. *

☐ Yes

Supporting Documents Check List

Please ensure you have the relevant forms for your application ready to upload to support your application:

Check List

- ☐ Public Liability Insurance Certificate of Currency
- ☐ Letters of Support
- ☐ Quotes from Suppliers for items over \$100
- ☐ Evidence of Incorporation, Constitution or Charter
- ☐ Auspice Information and Written Agreement (if applicable)
- ☐ Risk Management Plan
- ☐ Most Recent Audited Financial Statement Approved at your Organisations most recent AGM (for applications over \$5,000)
- ☐ Project Plan (for applications over \$5,000)

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- ☐ Venues Quote (if applying for a Council Venue Fee Waiver)
- ☐ Community Needs Assessment or Survey from Past Activities (not essential but highly favourable)

Information Check List

Please read the following documents prior to continuing your application:

- ☐ Townsville City Council Corporate Plan
- ☐ Community Grants and Partnerships Policy
- ☐ Outcomes Framework
- ☐ Community Grants Guidelines
- ☐ TCC Stretch Reconciliation Action Plan

All documents can be found on our Community Grants webpage <https://www.townsville.qld.gov.au/community-support/grants-and-partnerships/community-grants>

Funding Band

* indicates a required field

Funding Band

The Community Grant Program is focused on enabling successful activities through the provision of one-off funding.

Applications will be considered under one of the following funding bands;

- Less than or equal to \$5,000
- \$5,001 to \$25,000
- \$25,001 to \$50,000

Applications requesting a total grant value (Cash and Fee Waiver - Excluding GST) over \$50,000 will not be considered for funding under this program.

Which Funding Band are you applying for? *

- ☐ Less than or equal to \$5,000
- ☐ \$5,001 to \$25,000
- ☐ \$25,001 to \$50,000

Contact Details

* indicates a required field

Applicant Details

Applicant *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

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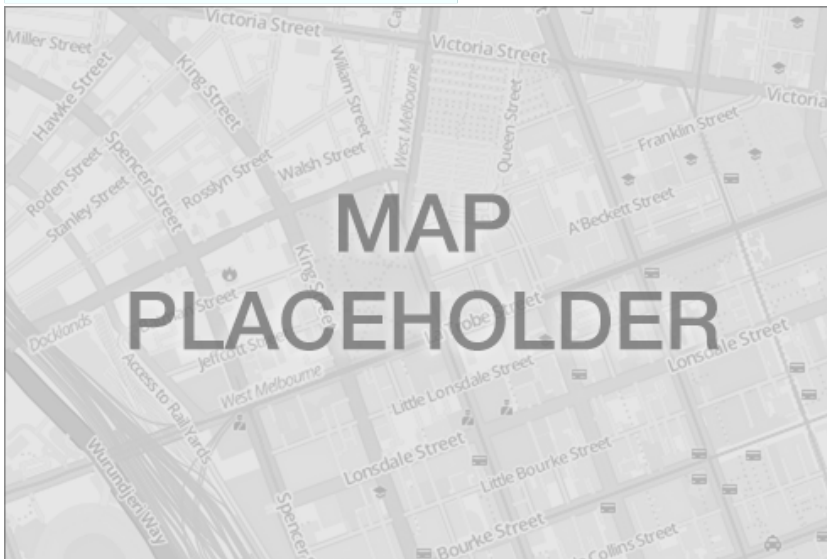
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Make sure you provide the same name that is listed in official documentation.

Department/Branch/Section *

Applicant primary address

Address



Applicant postal address

Address

Applicant primary phone number *

Must be an Australian phone number.

Applicant email address *

Must be an email address.

Applicant website

Must be a URL.

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If your organisation is not within the Townsville LGA, what presence, if any, do you currently have in Townsville?

Word count:

Must be no more than 300 characters.

Primary Contact Details

Primary contact *

Title

First Name

Last Name

This is the person we will correspond with about this grant.

Position held in organisation *

e.g., Manager, Director or Fundraising Coordinator.

Primary contact primary phone number *

Must be an Australian phone number.

Primary contact office phone number

Must be an Australian phone number.

Please consider using your organisations generic phone number.

Primary contact email address *

This is the address we will use to correspond with you about this grant. Please consider using your organisations generic email.

Organisation Details

*** indicates a required field**

Is your organisation a properly constituted Not-for-profit Organisation? *

☐ Yes

☐ No

What is your organisation's purpose or mission? *

Word count:

Must be no more than 200 characters.

Supporting Documentation

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What is your incorporation number?

Incorporated Association or Australian Company Number

Please provide evidence of your Company, Incorporation, Constitution or Charter

*

Attach a file:

Does your organisation have an ABN? *

☐ Yes

☐ No

Applicant 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	

As you do not have an ABN, if your application is successful, you will be required to submit a completed ATO Statement by a Supplier Form via Council's Eftsure verification process. Otherwise 48.5% of any approved grant may be withheld. The form, for your reference, can be found on [the ATO website](#).

Auspice Information

* indicates a required field

Is your organisation auspiced by another organisation for the purpose of this grant? *

☐ Yes

☐ No

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Unincorporated organisations or individuals applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.

Auspice Organisation Details

As you have indicated you require an auspice you will be required to fill out their organisation details and provide a letter from the auspice confirming this support.

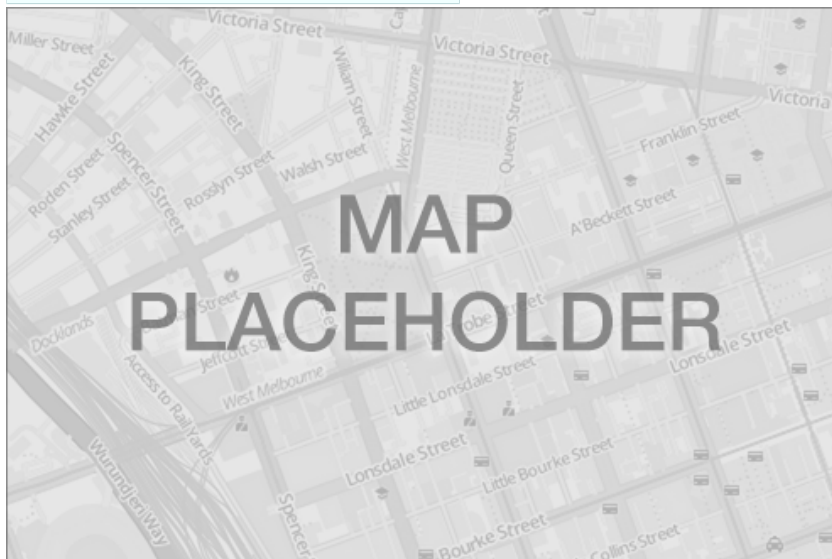
Auspice organisation name *

Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Auspice primary address

Address



Auspice postal address

Address

Auspice primary phone number *

Must be an Australian phone number.

Auspice email address *

Must be an email address.

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Auspice website

Must be a URL.

Primary contact person at auspice organisation *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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We may contact this person to verify that the auspice arrangement is valid and current.

Position held in organisation *

e.g., Manager, Board Member or Fundraising Coordinator.

Auspice primary contact primary phone number *

Must be an Australian phone number.

Auspice primary contact office phone number

Must be an Australian phone number.

Auspice primary contact email address *

Must be an email address

Please attach a letter from the auspice organisation confirming that the auspice arrangement is valid and current. *

Attach a file:

The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

Please provide evidence of your auspicing Company, Incorporation, Constitution or Charter *

Attach a file:

Does the auspice organisation have an ABN? *

☐ Yes ☐ No

Auspice 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.

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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	

Must be an ABN.

As the auspice organisation does not have an ABN, if your application is successful, you will be required to submit a completed ATO Statement by a Supplier Form via Council's Eftsure verification process. Otherwise 48.5% of any approved grant may be withheld. The form, for your reference, can be found on [the ATO website](#).

Other Council Support

Other Council Support

Applicants must disclose all types of funding and in-kind support they are receiving from Council. This will be any other financial or in-kind support that the applicant, applicant organisation or auspice organisation received (or is expected to receive) from Council for the current financial year not related to this application.

Does the applicant, applicant organisation or auspice organisation currently receive any other support from Council

☐ Yes ☐ No

Relevant to the current financial year

Other Council Support

Do not list cash or in-kind support you are applying for the Activity in this section (this information will be collected in the Activity Budget section for cash and in-kind).

Townsville City Council Section / Division	What type of support is Council providing?	Amount of Support (\$)
Department within Council offering your organisation support (i.e Galleries, Library, Venues	For example: Peppercorn lease, fee-waivers, financial support, in- kind support, other grant funding etc	Must be a dollar amount Must be a dollar amount.

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Other Funding

Does your organisation receive State or Government Support for this Activity?

☐ Yes ☐ No

If yes please provide details in the Partner Contributions table in the budget section of this form.

Your Activity

* indicates a required field

Project title *

Word count:

Must be no more than 25 words.

Provide a name for your activity/ project/program/initiative. Your title should be short but descriptive

Project Hero Image

Attach a file:



Upload an image that represents your activity. Drag and resize the square to define the area of the image you wish to submit.

Activity Dates

Anticipated start date *

Must be a date.

Please note start date must be a minimum of 45 days from the application submission date. However, please consider allowing sufficient time (an additional 10 days) for the eligibility period; to mitigate delays incurred due to application amendments and resubmission.

Anticipated end date *

Activities must be completed within 12 months of the start date listed above

Activities

Tell us where your Activity will take place. If the Activity you are applying for has multiple components, you can use this section to go into more detail.

You can stipulate one location for each Activity.

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If you have one Activity taking place in multiple places, you can either list each location as a separate Activity (e.g. Workshop #1; Workshop #2, with a specific location attached to each), or you can list one Activity with a generalised location (e.g. "Townsville CBD").

All Activities must be completed within 12 months of the primary Activity start date listed above. To add additional Activities, press + (next to the Location Bar)

Activity	Start Date	End Date	Location
Add one per row. Add more rows if you want to list additional Activities.	Leave blank if date is unknown or not relevant. Must be a date	Leave blank if date is unknown or not relevant. Must be a date	Where will your activity occur? Leave blank if unknown or not relevant

Who are the primary beneficiaries of this activity?

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of this Activity. If your Activity is open to everyone please choose the first item 'Universal'.

What are the primary areas of focus for this activity?

No more than 5 choices may be selected.

You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

Please provide a short summary of your Activity *

Word count:

Must be no more than 150 words.

This is your 'pitch' to Council. Be descriptive, but succinct about what the grant funding will be used for. Include a brief summary of who this Activity is for (i.e. beneficiaries), what you will do (i.e. the Activities you will perform), and what effects you expect to result from your activities (outcomes). Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Rationale: What is the need and how will you address it? *

Tell us why your Activity is needed, and why you believe the Activity you propose will produce the outcomes you seek. Provide statistics/evidence (where available) of both the need and the link between the work you will do and the outcomes you seek. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Activity Statistics

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How many people are you expecting to be involved with your Activity from each of the following categories:

Participants - Number of people who will actively participate in the activity e.g. Stall holders, athletes, service providers

Attendees - Number of people who will attend to support those participating as a spectator or supporter

Volunteers - Number of Volunteers assisting at your Activity

Paid Workers - Number of Paid Workers you have working on your Activity

Participants

Must be a number.

Attendees

Must be a number.

Volunteers

Must be a number.

Paid Workers

Must be a number.

Other

Must be a number.

Of the total number of participants and attendees you are estimating, how many are you expecting from out of town?

Must be a number.

Total Activity Attendance

This number/amount is calculated.

Are you charging a participation/attendance fee for your activity?

☐ Yes

☐ No

This will include but not limited to nomination fees, ticket sales, member fees, stall holder fees or similar.

Activity Fees

What is the cost per person to attend your Activity?

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Must be a dollar amount.
This figure must be GST exclusive

From the Activity statistics provided above how many people are you expecting to attend your Activity who are required to pay?

Must be a number.

Total amount of Income from Participation/Attendance Fees

This number/amount is calculated.

Does this Activity have community support? In particular, do the beneficiary and/or geographic communities affected by this Activity support the Activities you are proposing? *

☐ Yes ☐ No ☐ Don't know ☐ Not Applicable
Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful.

What evidence do you have that this Activity has community support? *

For example: findings from a community survey. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Please upload supporting documents

Attach a file:

A maximum of 5 files can be attached.

Project Plan

Please tell us about the administrative stages you expect to pass through as part of your Activity. You may use this table **Or** upload your own project plan to the supporting documents page on this application form.

Project Stage	Expected Date of Completion	Current Status

Project Plan

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- ☐ I will upload a Project Plan under Supporting Documents

Assessment Criteria

* indicates a required field

Assessment Criteria

The assessment criteria questions below require you to clearly demonstrate how your activity aligns with one or more of the objectives of this program.

[Community Grant Guidelines](#)

[Townsville City Council Corporate Plan 2021 - 2026](#)

You should aim to use as much of the word limit in each question as possible. This helps to ensure you have covered all of the criteria and explained your activity in detail.

The total value of funding you have requested (refer to the funding band you have selected in the budget section of your application) will determine which of the below criteria you will need to address:

Less than or equal to \$5,000

- 1.Participation Rates
- 2.Public Acknowledgement of Council Contribution
- 3.Social Inclusion
- 4.Liveability

\$5,001 to \$25,000

- 1.Contribution to City
- 2.Participation Rates
- 3.Public Acknowledgement of Council Contribution
- 4.Social Inclusion
- 5.Liveability

\$25,001 to \$50,000

- 1.Contribution to City
- 2.Economic return
- 3.Participation Rates
- 4.Public Acknowledgement of Council Contribution
- 5.Social Inclusion
- 6.Liveability
- 7.Sustainability

Please note that your responses to assessment questions should align with the outcomes table that follows the question.

Activity Outcomes

Outcomes are the changes applicants expect to occur for the beneficiaries (direct or indirect) of your activity. Tell us what your expected outcomes are for the corresponding criteria; which Council Corporate goal it aligns with, what your target number is and how this will be measured. Please see the [Outcomes Framework](#) for more details.

Generally, outcomes can be framed as an increase or decrease in one or more of the following:

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- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Immediate outcomes occur directly following an activity (e.g. within 1 month); medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

Contribution to City

Contribution to City - Which Council corporate goals does your activity directly align with and how will the initiative support the goal/? *

Word count:

Must be no more than 300 words.

Please consult the program guidelines for more information about our program and [Corporate Goals](#). Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response. Examples may include: Increase activity in community arts, sports and recreational activities; increased advocacy of Townsville LGA as a hub for modern industry; increased capacity building to demonstrate Townsville LGA as a leading centre of education, training and research

Outcomes - Contribution to City

What is your expected outcome for Contribution to City *

Word count:

Must be at least 50 words.

Which of the following does your expected outcome align with? *

- ☐ Increased participation in community arts, sports and recreational activities
- ☐ Increased capacity building to demonstrate Townsville LGA as a leading centre of education, training and research
- ☐ Increase in physical contributions such as public art, tree planting etc.
- ☐ Increase understanding, value and recognition of Aboriginal and Torres Strait Islander cultures, histories, knowledge, and rights through cultural learning.
- ☐ Other

No more than 1 choice may be selected.

Which metric will you use to track and report on your progress? *

- ☐ Number of locally delivered events, workshops, programs etc.
- ☐ Number of people reporting increased sense of civic pride
- ☐ Number of surveys completed measuring benefit of contribution of activity
- ☐ Other

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No more than 1 choice may be selected.

What is your target number? *

Must be a number.

What is the expected timeframe for this outcome? *

☐ Immediate to short-term ☐ Intermediate to medium-term ☐ Long-term

No more than 1 choice may be selected.

Economic Return

Explain how your initiative will bring economic benefit to Townsville LGA? *

Word count:

Must be no more than 300 words.

Examples may include: economic activation (e.g. increased expenditure); increased tourism; increased number of overnight stays; increased investment attraction from external entities by promoting Townsville as hub for modern industry; boosting employment in Townsville through education, training and research facilities

Outcomes - Economic Return

What is your expected outcome for Economic Return? *

Word count:

Must be no more than 50 words.

Which of the following does your expected outcome align with? *

- ☐ Increase in economic activation (e.g., increased expenditure)
- ☐ Increased tourism
- ☐ Increased number of overnight stays
- ☐ Increased investment attraction from external entities to Townsville
- ☐ Increase participation and/or employment in Townsville
- ☐ Work with and support the development of ecotourism products and services that incorporate Aboriginal and Torres Strait Islander knowledge, experience, expertise and capacity in building collaborative learnscapes.
- ☐ Other:

No more than 1 choice may be selected.

Which metric will you use to track and report on your progress? *

- ☐ Number of local businesses benefited from economic injection
- ☐ Number (\$ Value) of spend per attendee
- ☐ Number of inter-state visitors
- ☐ Number of intra-state visitors

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- ☐ Number of international visitors
- ☐ Number of bed-stays/accommodation reports
- ☐ Number of promotional actions
- ☐ Number of investment partnerships created
- ☐ Number of economic investment (\$ Value) achieved
- ☐ Number of employment readiness activities delivered
- ☐ Number of employer connections made
- ☐ Number of jobs created
- ☐ Number of jobs filled
- ☐ Other:

No more than 1 choice may be selected.

What is your target number *

Must be a number.

What is the expected timeframe for this outcome? *

- ☐ Immediate to short-term ☐ Intermediate to medium-term ☐ Long-term

Participation Rates

Explain how your initiative will result in increased capacity and participation throughout the community in Townsville LGA? *

Word count:

Must be no more than 300 words.

Examples should include year on year increased levels of participation in events aligned to Council's Corporate Plan; increased levels of volunteering; promoting diversity in community participation; participation rate of target audience (e.g. post code) by connecting them to what they need at the time they choose.

Outcomes - Participation Rates

What is your expected outcome for Participation Rates?

Which of the following does your expected outcome Align with? *

- ☐ Increase levels of participation
- ☐ Increase levels of volunteering
- ☐ Increase promotion of diversity in community participation
- ☐ Increase participation rate of target audience
- ☐ Other:

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Which metrics will you use to track and report on progress?

- ☐ Number of attendees

What is your target number?

Must be a number.

What is the expected timeframe for this outcome?

- ☐ Immediate to short-term
☐ Intermediate to medium-term
☐ Long-term

Public Acknowledgement of TCC Contribution

Tell us how you intend on acknowledging Council contribution towards your Activity and Council's values, vision, and mission as part of the Activity? *

Word count:

Must be no more than 300 words.

Examples may include: promotion and recognition of TCC on social media; Mayoral or Councillor attendance or profile on events; marketing collateral including the use of TCC logo and statements; public awareness of TCC's role, policies, corporate objectives and financial and in-kind support.

Social Inclusion

How will this Activity improve diversity, community cohesiveness and engage minority groups to promote social inclusion in Townsville LGA? Tell us how you will reach your ideal outcome of social inclusion *

Word count:

Must be no more than 300 words.

Examples may include: Increased areas to support services; increased connectedness to link communities with what they need at the time they choose; increased opportunity for participation in society by promoting Townsville as a circular economy (e.g. employment, access)

Outcomes - Social Inclusion

What is your expected outcome for Social Inclusion? *

Which of the following does your expected outcome align with? *

- ☐ Increase access to support services
☐ Increase connectedness

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- ☐ Increase in social cohesion
- ☐ Build mutually beneficial relationships with Aboriginal and Torres Strait Islander peoples and the broader community
- ☐ Other:

No more than 1 choice may be selected.

Which metric will you use to track and report on your progress? *

- ☐ Number of support services available through activity
- ☐ Number of participants
- ☐ Number of individuals connecting with support services
- ☐ Number of connections made between individuals e.g., friendships
- ☐ Number of people who joined/ signed up for future activities
- ☐ Number of new members
- ☐ Number of individuals reporting increased sense of wellbeing
- ☐ Number of individuals reporting increased sense of belonging
- ☐ Other:

No more than 1 choice may be selected.

What is your target number? *

Must be a number.

What is the expected timeframe for this outcome? *

- ☐ Immediate to short-term ☐ Intermediate to medium-term ☐ Long-term

Liveability

Explain how this Activity will bring a lasting benefit to the community within Townsville LGA? *

Word count:

Must be no more than 300 words.

Examples may include: Improved liveability by connecting the community to what they need at the time they choose; improved health outcomes; reduction in anti-social behaviour

Outcomes - Liveability

What is your expected outcome for Liveability? *

Which of the following does your expected outcome align with? *

- ☐ Improve liveability
- ☐ Increase improvement in health outcomes

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- ☐ Decrease in anti-social behaviour
- ☐ Other:

No more than 1 choice may be selected.

Which metric will you use to track and report on your progress? *

- ☐ Number of people who reported that "this activity contributed to Townsville as a great place to live"
- ☐ Number of people who accessed health service
- ☐ Number of people who reported improved health outcomes/ benefit
- ☐ Number of at-risk individuals participating in activity
- ☐ Number of participants who reported increased level of confidence
- ☐ Number of people who identified change in behaviour/ attitude
- ☐ Other:

No more than 1 choice may be selected.

What is your target number? *

Must be a number.

What is the expected timeframe for this outcome? *

- ☐ Immediate to short-term
- ☐ Intermediate to medium-term
- ☐ Long-term

Sustainability

Explain how this Activity will support the financial well-being of businesses within Townsville LGA? *

Word count:

Must be no more than 300 words.

Examples may include: decreased future reliance on TCC for future funding; building a circular economy with greater collaboration and resource sharing between community groups; diversification of industry to support Townsville LGA businesses; expansion of business operations by promoting Townsville LGA as a hub for modern industry

Outcomes - Sustainability

What is your expected outcome for Sustainability?

Which of the following does your expected outcome align with? *

- ☐ Increase leverage of Council funding
- ☐ Increase collaboration and resource sharing between community groups and/or local businesses

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- ☐ Increase opportunities for Aboriginal and Torres Strait Islander owned and operated businesses to supply goods and services into the Townsville Community
- ☐ Decreased reliance on council funding
- ☐ Other:

No more than 1 choice may be selected.

Which metrics will you use to track and report on your progress? *

- ☐ Number of other revenue streams and/or funding bodies
- ☐ Ratio of Council funds to other funds
- ☐ Number of resources shared
- ☐ Number of collaborative partners/ connections to deliver activity
- ☐ Number (value) of Local spend as a percentage of total expenditure
- ☐ Number (value) of in-kind support from local sources as a percentage of total income
- ☐ Other:

No more than 1 choice may be selected.

What is your target number?

Must be a number.

What is the expected timeframe for this outcome?

- ☐ Immediate to short-term ☐ Intermediate to medium-term ☐ Long-term

No more than 1 choice may be selected.

Applicant Capacity

* indicates a required field

Now that we know about your activity, we want to find out more about your organisation's capacity to undertake the work you propose. Please provide some information about your organisation that will show us you can deliver successful outcomes through your proposed activity. *

Word count:

Must be no more than 300 words.

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, etc.) and how you will complete this Activity within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Activity Budget

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* indicates a required field

Cash Funding

The Community Grant Program is focused on enabling successful activities through the provision of one-off funding.

Applications will be considered under one of the following funding bands;

- Less than or equal to \$5,000
- \$5,001 to \$25,000
- \$25,001 to \$50,000

Applications requesting a total grant value (Cash and Fee Waiver - Excluding GST) over \$50,000 will not be considered for funding under this program.

Are you Requesting Cash Funding? *

☐ Yes ☐ No

Budget (GST exclusive)

Tell us how you propose to spend the grant funding i.e. list each item of expenditure and the amount.

When completing the table:

- List one Supplier per line
- Enter the exact value amount to the cent (do not use whole dollar amounts, do not round up or down)
- Provide quotes for all suppliers over \$100.00 (ex GST)
- All amounts entered are excluding GST
 - To apply the correct amount please use the [GST Calculator](#)
- Do not include funding contributions obtained from other sources in this section

If you are not requesting cash funding from Council (i.e. Venue Hire Fee Waiver only) do not fill in this section

Refer to the [Community Grant Guidelines](#) for ineligible expenditure.

Item Description	Amount Requested to be Funded by this Grant - Excluding GST	Quote Upload
e.g. venue hire (that is not a council venue), equipment hire, external facilitator fees, marketing	Must be a dollar amount.	Quotes for items over \$100 are required.
	\$	

Total Cash Amount Requested

\$

This number/amount is calculated.

This should equal the total cash support you are requesting from Council (excluding GST).

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Budget Upload

Please attach your activities complete budget including items not required to be funded by this grant.

Complete Budget Upload

*

Attach a file:

A maximum of 1 file may be attached.

Further Council Support (In-Kind)

Are you requesting a Council Venue Hire Fee Waiver for this activity? *

☐ Yes

☐ No

Venue Hire Cost Breakdown

You must obtain a quote from Council's Venues Team. This quote must be added / attached to your application in the Quote Uploads Question below. The amounts requested to be waived below must be broken down into **venue hire** and **hard costs**. All costs must be excluding GST. Please use the GST Calculator for the correct amounts: [Australian GST Calculator](#)

Venue Hire Fee Waiver Requested - Excluding GST *

Must be a dollar amount.

The value of Council venue hire fees only you are asking Council to waive (refer to your Council venue quote)

Venue Hire - Hard Costs - Excluding GST (Staffing, Cleaning, Security etc) *

Must be a dollar amount.

Please upload a quote for the Council facility/open space you are requesting in-kind support for *

Attach a file:

Total Fee Waiver and Hard Costs Amount Requested - excluding GST

This number/amount is calculated.

Total Grant Value you are Requesting from Council (including Cash and Fee Waiver, if applicable) - Excluding GST

This number/amount is calculated.

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

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Partner Contributions (excluding GST)

Please list any partners you will work through or with to reach your beneficiaries and/or achieve your outcomes.

Tell us about any other support your Activity will receive. This could be additional funding or in-kind support (including from your organisation).

Partner contributions could include:

- **Other grants** - Australian or Queensland government, Foundations, Philanthropic organisations and other grantors.
- **Earned income** - participation fees, product sales, ticket sales, workshop fees, partner contribution
- **Sponsorships, fundraising and donations** - crowd funding, operational support or other cash
- **Your organisations own contribution** - cash, equipment, in-kind support
 - [Cost of Volunteering Calculator](#)

Please provide evidence of this partnership. This should be provided as a letter of support from the activity partner/s, in which they detail the type of support (e.g. auspicings, sponsoring, staff time, venue hire, etc) and the dollar (\$) value of the support.

Please click *Maximise* to expand the table so it is easier to navigate.

Partners	In-kind or cash support?	What type of support are they providing?	Amount of support (\$)	Is this support confirmed?	Letter of support
One per row. Add extra rows if needed.		e.g. venue hire, prizes, equipment, staffing	Must be a dollar amount.	Say no unless partner has confirmed and provided a letter of support	If confirmed please provide evidence of partnership support here

Total Amount of Partner Support (\$)

Must be a dollar amount.

Please calculate the total confirmed amount of support.

Supporting Documents

* indicates a required field

Please provide a link to or attach a copy of your most recent Annual Report. *

☐ Upload

☐ Link

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If you do not produce an annual report, please provide us with your most recently approved AGM financial statements (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position).

Please upload your Risk Assessment Plan *

Attach a file:

A template for a risk assessment plan can be found on the [Community Grants webpage](#)

Please upload your Public Liability Insurance Certificate of Currency *

Attach a file:

Organisations must hold appropriate public liability insurance per activity. If your Auspice is providing insurance you must attach their public liability certificate of currency.

Financial Statement Upload *

Attach a file:

Link *

Must be a URL.

Project Plan Upload *

Attach a file:

If you did not provide your project plan details in the table provided, please upload your project plan here.

Certification, Submission and Feedback

*** indicates a required field**

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

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Name of authorised person *

Title

First Name

Last Name

Must be a senior staff member, trustee or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

Submitting the Application

Organisations must ensure that the application is complete with all necessary uploads attached. If not, applicants may receive a request for more information regarding the application.

Amendments to a submitted application will be allowed once.

The assessment process will not commence until Council deems the application to be eligible and complete. Failure to supply a complete application or altering the information in an existing application may delay the start of the assessment period.

Grant Recipients

Townsville City Council require all successful grant recipients to be listed in Council's Account Management System as a supplier to receive grant payments.

Successful grant recipients will be contacted by EFTSure on behalf of Townsville City Council for data and payment verification.

**Organisations without an ABN will be required to submit a Statement by Supplier (ATO Form) as part of the EFTSure verification process.*

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

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☐ Very Easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very Difficult

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.