#### 2024/25 Economic Activation Partnerships

Please read this section in full before starting your application.

It is important that you take the time to read through the <u>Economic Activation</u> Partnership <u>Guidelines</u> 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

Economic Activation Partnerships create mutually beneficial agreements with community organisations to support the delivery of economic activation outcomes for Townsville. Benefits may include enhancement of the profile of Townsville; fostering community pride; and driving job creation and growth in the local government area.

This program is focused on enabling ongoing successful Activities through the provision of annual or multi-year funding. Funding for a multi-year agreement is for a maximum of three years.

Economic Activation Partnerships are most suited to community organisations that have a proven working history with Council and seek funding and/or in-kind support to facilitate Activities which grow Townsville.

You may be a recipient of an Economic Activation Partnership 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, boosting the economy of Townsville, promoting sustainable practices;
- Support local organisations, promoting future industries, fostering innovation, and/or increasing employment;
- Promote liveability and vibrancy of Townsville as a community through social, environmental, and/or economic Activities; e.g. sporting events, regional attraction, community events;
- Raise awareness of the Townsville region as a destination; e.g. tourism events, sporting events, arts and cultural 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.

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 of \$5,001 to \$50,000 plus by negotiation.

#### 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 <a href="mailto:communitygrants@townsville.qld.gov.au">communitygrants@townsville.qld.gov.au</a>.

Technical enquiries about SmartyGrants should be directed to SmartyGrants 03 9320 6888 between 9am to 5pm Monday to Friday or emailing <a href="mailto:service@smartygrants.com.au">service@smartygrants.com.au</a>.

#### **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 <u>Information Privacy Policy</u>.

#### Eligibility

\* indicates a required field

#### **Eligibility Requirements**

You will need to ensure that your Activity supports <u>Council's Corporate Plan goals</u>. 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.

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. Or is a business which carries on activities for a public purpose;
- 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;
- 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: **Economic Activation Partnership Guidelines** 

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 <a href="mailto:communitygrants@townsville.qld.gov.au">communitygrants@townsville.qld.gov.au</a>.

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

<b>Application Number</b>	
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) or is a business which carries on activities for a public purpose;
- 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.

Υοι	u must	confirm	that all	statements	above are	e true and	correct. *
	Yes						

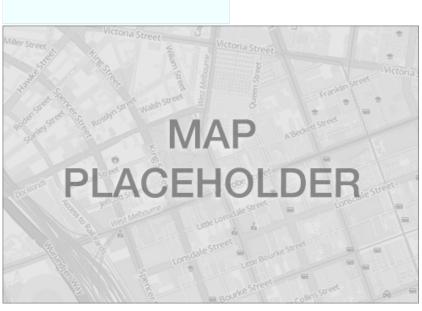
#### Supporting Documents Check List

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

C	he	rk	ict
•			 ısı

Public Liability Insurance Certificate of Currency
Letters of Support

<ul> <li>□ Quotes from Suppliers for items over \$100</li> <li>□ Evidence of Incorporation, Constitution or Charter</li> <li>□ Auspice Information and Written Agreement (if applicable)</li> <li>□ Risk Management Plan</li> <li>□ Most Recent Audited Finacial Statement Approved at your Organisations most recent AGM</li> <li>□ Project Plan</li> <li>□ Venues Quote (if applying for a Council Venue Fee Waiver)</li> <li>□ Community Needs Assessment or Survey from Past Activities (not essential but highly favourable)</li> </ul>			
Information Check List			
Please read the following documents prior to continuing your application:			
<ul> <li>□ Townsville City Council Corporate Plan</li> <li>□ Community Grants and Partnerships Policy</li> <li>□ Outcomes Framework</li> <li>□ Economic Activation Partnership Guidelines</li> <li>□ TCC Stretch Reconciliation Action Plan</li> <li>All documents can be found on our Economic Activation Partnerships webpage <a href="https://www.townsville.qld.gov.au/community-support/grants-and-partnerships/economic-activation-partnerships/_nocache">https://www.townsville.qld.gov.au/community-support/grants-and-partnerships/economic-activation-partnerships/_nocache</a></li> </ul>			
Contact Details			
* indicates a required field			
Applicant Details			
Applicant Type  ○ Properly constituted not-for-profit organisation  ○ For-profit Organisation  ○ Require an Auspice who is for-profit or a properly constituted not-for-profit organisation			
Applicant *  O Individual Organisation Organisation Name			
Title First Name Last Name			
Make sure you provide the same name that is listed in official documentation.			
Department/Branch/Section *			
Applicant primary address Address			



**Primary Contact Details** 

First Name

Primary contact \*

Title

Applicant postal address Address				
Addiess				
Applicant primary phone numb	per *			
Must be an Australian phone number.				
Applicant email address *				
Must be an email address.				
Applicant website				
Must be a URL.				
If your organisation is not with you currently have in Townsvil		wnsville LGA, v	vhat presen	ce, if any, do
you currently have in Townsvii	iic:			
Word count: Must be no more than 300 characters				

Last Name

This is the person we will correspond with about this grant.
Position held in organisation *
Manager District on Freedomicine Constitution
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
Supporting Documentation
Supporting Documentation
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 ADN provided will be used to be by the fallendary in C
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

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.

What is your organisation's purpose or mission? *			
Word count:			
Must be no more than 200 characters			

#### **Auspice Information**

\* indicates a required field

## Is your organisation auspiced by another organisation for the purpose of this grant? $\mbox{\ensuremath{^{*}}}$

O Yes O No

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.

As you have indicated that; you are not a not-for-profit organisation or, auspiced by a not-for-profit organisation or a business which carries on activities for a public purpose you do not currently meet the eligibility criteria for this grant.

Please check that you have marked the boxes correctly on the previous pages or contact communitygrants@townsville.qld.gov.au or 13 48 10.

Applications that are submitted ineligible will not be assessed.

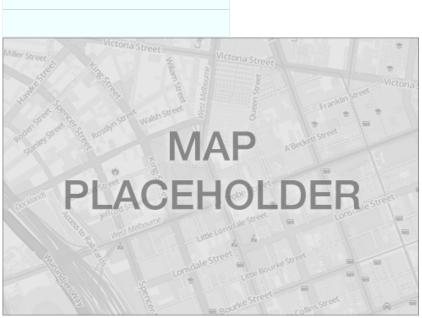
#### **Auspice Organisation Details**

As you have indicated you require an auspice you will be required to fill out your auspice organisation details and provide:

- A letter from the auspice confirming this support.
- Evidence of Incorporation, Constitution or Charter
- Public liability certificate of currency

Auspice organisation name * Organisation Name	
Please use the organisation's full name. Make sure documentation such as that with the ABR, ACNC of	eyou provide the same name that is listed in officia r 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.

Auspice website	
Must be a URL.	
Primary contact norcon at auchico organi	cation *
Primary contact person at auspice organi Title First Name Last Name	Sation
We may contact this person to verify that the auspic	ce arrangement is valid and current.
Position held in organisation *	
e.g., Manager, Board Member or Fundraising Coordi	nator.
Auspice primary contact primary phone n	umber *
Must be an Australian phone number.	
Auspice primary contact office phone nun	nber
Must be an Australian phone number.	
Auspice primary contact email address *	
Must be an email address	
Please attach a letter from the auspice or arrangement is valid and current. * Attach a file:	ganisation confirming that the auspice
The letter must be signed by an authorised person (include: name, position, signature and date.	e.g., Manager, CEO or Board Chair) and must
Please provide evidence of your auspicing or Charter * Attach a file:	Company, Incorporation, Constitution
Actach a file.	
Please upload your auspice public liability Attach a file:	/ certificate of currency *
Does the auspice organisation have an Al	3N? *
	○ 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.

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 Cou	ncil		
○ 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 What type of support is Amount of Support (\$) Section / Division Council providing?

offering your organisation	For example: Peppercorn lease, fee-waivers, financial support, inkind support, other grant funding etc	

#### Other Funding

○ 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 \*

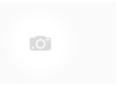
#### Word count:

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.

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			Where will your activity
more rows if you want to	unknown or not relevant.	unknown or not relevant.	occur? Leave blank if
list additional Activities.	Must be a date	Must be a date	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 pr	opose will produce

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 <u>Answers Bank</u> if you need some ideas about how to frame your response.

#### **Activity Statistics**

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

If you are requesting multiyear funding use the statistics estimated for the first year of funding.

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.	
	attendees you are estimating, how many
are you expecting from out of town? *	
Mark has a sound as	
Must be a number.	
Total Activity Attendance *	
This number/amount is calculated	

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

O Yes O 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?
Must be a dollar amount. This figure must be GST exclusive
From the Activity statistics provided above how many people are you expecting tattend 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? *
O Yes O No O Don't know O 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 or will be supported by the community? *
For example: findings from a community survey. Go to the SmartyGrants <u>Answers Bank</u> 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

Page 16 of 34

Please tell us about the administrative stages you expect to pass through as part of your Activity. You may use this table  $\bf Or$  upload your own project plan to the supporting

documents page on this application form.

Project Stage	Expected Date of Completion	Current Status

#### **Project Plan**

I will upload a Project Plan under Supporting Documents

#### **Funding Band**

\* indicates a required field

#### **Funding Band**

The Economic Activation Partnership Program is focused on enabling successful activities through the provision of annual or multi-year funding.

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

- \$5001 to \$25,000
- \$25,001 to \$50,000 plus by negotiation

The funding band relates to total cash and council venue fee waivers / in-kind support (excluding GST).

Applications requesting a total grant value less than \$5,001 will not be considered for funding under this program.

Applications requesting a total grant value (including cash, Council venue fee waivers/ in-kind support - excluding GST) over \$50,000 are by negotiation only.

If you are requesting a multi-year partnership this section relates to the yearly amount - not the accumulative amount.

All amounts must be excluding GST.

Wh	hich funding band aı	e you	applying	for?	:
	\$5,001 to \$25,000				
	\$25,001 to \$50,000				
	\$50,000 plus				

#### 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.

**Economic Activation Partnership 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:

#### \$5,001 to \$25,000

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

#### \$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:

- 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 *
<ul> <li>Which of the following does your expected outcome align with? *</li> <li>Increased participation in community arts, sports and recreational activities</li> <li>Increased capacity building to demonstrate Townsville LGA as a leading centre of education, training and research</li> <li>Increase in physical contributions such as public art, tree planting etc.</li> <li>Increase understanding, value and recognition of Aboriginal and Torres Strait Islander cultures, histories, knowledge, and rights through cultural learning.</li> <li>Other</li> </ul>
<ul> <li>Which metric will you use to track and report on your progress? *</li> <li>Number of locally delivered events, workshops, programs etc.</li> <li>Number of people reporting increased sense of civic pride</li> <li>Number of surveys completed measuring benefit of contribution of activity</li> <li>Other</li> </ul>
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.

Provide clear information on your robust approach to deliver on the outcomes for 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

Increased tourism

What is your expected outcome for Economic Return? *
Which of the following does your expected outcome align with 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  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.
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  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
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  Other
What is your expected outcome for Economic Return? *
Which of the following does your expected outcome align with align with? *

<ul> <li>Increased number of overnight stays</li> <li>Increased investment attraction from external entities to Townsville</li> <li>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.</li> </ul>
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  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 jobs created  Number of jobs created  Number of jobs filled
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 Other
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?

<ul> <li>Which of the following does your expected outcome align with? *</li> <li>Increase levels of participation</li> <li>Increase levels of volunteering</li> <li>Increase promotion of diversity in community participation</li> <li>Increase participation rate of target audience</li> </ul>
<ul> <li>Which metrics will you use to track and report on progress?</li> <li>Number of attendees</li> <li>Number of participants involved delivering the programs involved</li> <li>Number of people volunteering</li> <li>Number of organisations requiring volunteers</li> <li>Number of activities supporting inclusivity</li> <li>Number of inclusively led activities</li> <li>Number of participants from outside target audience</li> </ul>
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 *

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Examples may include: Increased areas to support services; increased connectedness to link

society by promoting Townsville as a circular economy (e.g. employment, access)

communities with what they need at the time they choose; increased opportunity for participation in

Must be no more than 300 words.

Outcomes - Social Inclusion
What is your expected outcome for Social Inclusion? *
<ul> <li>Which of the following does your expected outcome align with? *</li> <li>Increase access to support services</li> <li>Increase connectedness</li> <li>Increase in social cohesion</li> <li>Build mutually beneficial relationships with Aboriginal and Torres Strait Islander peoples and the broader community</li> </ul>
<ul> <li>Which metric will you use to track and report on your progress? *</li> <li>Number of support services available through activity</li> <li>Number of participants</li> <li>Number of individuals connecting with support services</li> <li>Number of connections made between individuals e.g., friendships</li> <li>Number of people who joined/ signed up for future activities</li> <li>Number of new members</li> <li>Number of individuals reporting increased sense of wellbeing</li> <li>Number of individuals reporting increased sense of belonging</li> </ul>
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
O Decrease in anti-social behaviour
<ul> <li>Which metric will you use to track and report on your progress? *</li> <li>Number of people who reported that "this activity contributed to Townsville as a great place to live"</li> <li>Number of people who accessed health service</li> <li>Number of people who reported improved health outcomes/ benefit</li> <li>Number of at-risk individuals participating in activity</li> <li>Number of participants who reported increased level of confidence</li> <li>Number of people who identified change in behaviour/ attitude</li> </ul>
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  O 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

<ul> <li>Which metrics will you use to track and report on your progress? *</li> <li>Number of other revenue streams and/or funding bodies</li> <li>Ratio of Council funds to other funds</li> <li>Number of resources shared</li> <li>Number of collaborative partners/ connections to deliver activity</li> <li>Number (value) of Local spend as a percentage of total expenditure</li> </ul>	
<ul> <li>Number (value) of in-kind support from local sources as a percentage of total incor</li> </ul>	ne
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	
organisation's capacity to undertake the work you propose. Please provide s information about your organisation that will shows us you can deliver succe 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 how you will complete this Activity within the proposed timelines. Provide information also about past work that may demonstrate your organisation's capacity to undertake this work. Provide lir further explanatory material if available/relevant. Go to the SmartyGrants Answers Bank if your some ideas about how to frame your response.	it any nks to
Funding Specifics	
* indicates a required field	
Are you requesting a multi year partnership? *  ○ Yes  ○ No	
Are you requesting multi-year cash funding?  ○ Yes  ○ No	

Please provide a breakdown of the multi-year cash funding specifics excluding GST.

#### Multi-year Cash Funding Specifics

**Do not** add Council Venue Fee Waivers to this Amount. First year funding start date Must be a date. First year funding end date Must be a date. First year funding cash amount requested - excluding GST Must be a dollar amount. Second year funding start date Must be a date. Second year funding end date Must be a date. Second year cash amount requested excluding GST Must be a dollar amount. Third year funding start date Must be a date. Third year funding end date Must be a date. Third year funding cash amount requested - excluding GST Must be a dollar amount. Total multi-year cash request This number/amount is calculated. Are you requesting a multi-year council venue fee waiver? Yes O No Fee Waivers

Please detail the total fee waiver request for each year of funding - excluding GST.

If you are requesting a multi-year Council Venue fee waiver, use the total value quoted for the first year (excluding GST).

Please note you will need to upload a Council venue quote for the first-year booking.

If your application is successful, your organisation will be responsible for ensuring venue bookings and arrangements for each year with Council's Venues team.

Please use the GST Calculator for the correct amount.

First year fee waiver start date	
	Must be a date.
First year fee waiver end date	
	Must be a date.
First year total fee waiver amount - excluding GST	
	Must be a dollar amount.
Second year fee waiver start date	
	Must be a date.
Second year fee waiver end date	
	Must be a date.
Second Year fee waiver amount - excluding GST	
,	Must be a dollar amount.
Third year fee waiver start date	
	Must be a date.
Third year fee waiver end date	
	Must be a date.
Third year fee waiver amount - excluding GST	Much has a dellar areasunt
	Must be a dollar amount.
Total multi-year fee waiver request	
This number/amount is calculated.	

#### **Increase Explanation**

If the amount you have requested for the second and third year is less than or, the same as the first-year amount requested, you are not required to answer this question. If the amount increases, please read on.

As per the Economic Activation Partnership guidelines allowances and contingencies will not be funded. To help us understand why the amount you have requested has increased in the second and / or third year we require an explanation.

Please explian why the amount you have requested increases from the first year of funding request.
Word count:  Must be no more than 300 words.  Only fill this section if the funding you are requesting increases after the first year of funding amount requested.
Tell us how a multi-year funding partnership will benefit your Activity *
Word count:  Must be no more than 300 words.  You should mention any secured Sponsorship agreements for future years. How having secured Funding from Council will be of benefit to your organisations planning
Activity Budget
* indicates a required field
Cash Funding
The Economic Activation Partnership Program is focused on enabling successful activities through the provision of multi - year or one-off funding.
Applications will be considered under one of the following funding bands;
<ul> <li>\$5,001 to \$25,000</li> <li>\$25,001 to \$50,000</li> <li>\$50,000 plus</li> </ul>
Applications requesting a total grant value (Cash and Fee Waiver - Excluding GST) over \$50,000 will not be considered for funding under this program unless negotiated prior to applying.
The funding band relates to the yearly amount - not the accumulative amount.
Are you Requesting Cash Funding? *  ○ Yes  ○ No
First Year 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 guotes 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.

This budget expenditure table is for the first year of funding only. If your application is successful, you will have the opportunity to submit a new budget (for the approved amount) for review, for each year of funding granted.

Refer to the Economic Activation Partnership 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).

#### **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.	
	4	

#### Further Council Support (In-Kind)

Are you requesting a Council	<b>Venue Hire Fee Waiver for this activity?</b>
○ 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: <u>Australian GST Calculator</u>

If you are applying for a multi-year grant only provide the amounts for the first year of funding.

Please note: all venue bookings and access arrangements are the responsibility of the applicant to confirm with Council's venues team.

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) - Excluding GST
This number/amount is calculated. What is the total financial support you are requesting in this application?
Distribution of council funds per person
This number/amount is calculated.
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. auspicing, 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 (\$)	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.	partner has confirmed and provided a letter	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
If you do not produce an annual i	report, please provide us with your most recently approved AGM
financial statements (may include and a Balance Sheet / Statement	e a Profit and Loss Statement / Statement of Financial Performance of Financial Position).
Please upload your Risk As	ssessment Plan *
Attach a file:	

Please upload your Public Liability Insurance Certificate of Currency \* Attach a file:

A template for a risk assessment plan can be found on the Community Grants webpage

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 there.	he table provided, please upload your project plan
Optional additional document upload to Attach a file:	support your application
Optional	
Attach a file:	
Optional	
Certification, Submission and Fe	edback
* indicates a required field	
Certification	
This section must be completed by an appropriate applicant organisation (may be different application form).	
I certify that to the best of my knowledge application are true and correct, and I used organisation is approved for this grant, and conditions of the grant as outlined	nderstand that if the applicant we will be required to accept the terms
I agree *	

Name of authorised	Title	First Name	Last Name	
person *				
	Must be a authorised	senior staff member volunteer	, trustee or appropr	iately
Position *				
	Position he	eld in applicant organ	nisation (e.g. CEO, T	reasurer)
Contact phone number *				
	We may co	n Australian phone no ontact you to verify t licant organisation		is authorised
Contact Email *				
	Must be ar	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:

	Very Easy		Easy $\square$	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.								