

23/24 Community Organisation Partnership Application Form

Form Preview

2023/24 Community Organisation Partnerships

Please read this section in full before continuing

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

If you are seeking in-kind support for a Council Venue please contact the Venues Team before proceeding with this application.

About the Program

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

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.

Community Organisation Partnerships are most suited to community organisations that seek operational funding and/or in-kind support to facilitate ongoing Activities which align with the public interest and improve the quality of life for residents in Townsville.

You may be a recipient of a Community Organisation 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, sharing knowledge;
- Promote liveability and vibrancy of Townsville as a community through recurrent 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.

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You are encouraged to apply as early as possible to allow up to 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 an 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.

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 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 Requirements

You will need to ensure that your Activity supports at least one of [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.

Application 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 tertiary 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:

- Consumable items such as alcohol, fuel, food (including catering);
- Costs paid directly to applicant, applicant/organisation or auspice;
- Retrospective costs such as reimbursement of any costs already incurred from the Activity or 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.), costumes, sheet music and furniture or the like;
- Prize money, prizes or trophies, competitions;
- Vouchers, inc. pre-paid or store cards;
- Payment of debts and loans;
- Fees for services (grant writer or grant assistance fees, project management fees, auspice fees);
- Items purchased prior to approval;
- Items ordered, committed to (with a signed document or paid deposit) or bought before the funding has been approved;
- A Duplicate Funding Activity.

Ineligible Activites

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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 others 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.

Application Details

* indicates a required field

Applicant Details

Applicant Name *

Individual

Organisation

Organisation Name

First Name

Last Name

Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ABN, ACNC or ATO. Individuals must be auspiced by a properly constituted, not-for-profit organisation

Applicant Type *

Properly constituted not-for-profit organisation

Require an Auspice who is a properly constituted not-for-profit organisation

Select which one applies to your organisation's situation

Applicant Contact Information

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Primary Contact Number

*

Must be an Australian phone number.
Please include the area code.

Mobile Number

Must be an Australian phone number.

Primary Contact Email *

Must be an email address.

Primary Contact Address

*

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Primary Contact Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

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

Website

Must be a URL.

Organisation Logo

Attach a file:



Upload a logo or image that represents your organisation. Drag and resize the square to define the area of the image you wish to submit.

ABN Details

Do you have an ABN? *

Yes

No

*Organisations without an ABN may be requested to submit a Statement by Supplier (ATO) Form

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ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

| Information from the Australian Business Register | |
|---|----------------------------------|
| ABN | |
| Entity name | |
| ABN status | |
| Entity type | |
| Goods & Services Tax (GST) | |
| DGR Endorsed | |
| ATO Charity Type | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |

Must be an ABN.

Supporting Documentation

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

Attach a file:

Note - An organisation is not-for-profit if it is not carried on for the profit or gain of its individual members. This applies for direct and indirect gains, both while the organisation is being carried on and on its winding up. We accept an organisation as not-for-profit if its constitution or governing documents prohibit distribution of profits or gains to individual members and its actions are consistent with the prohibition. NB. If council is unable to establish an organisation's not-for-profit status, additional evidence may be requested following the submission of an application

Please upload your Public Liability Insurance Certificate of Currency *

Attach a file:

Organisations must hold appropriate public liability insurance per Activity

Auspice Details

* indicates a required field

Applicants who are not a properly constituted, not-for-profit organisation will need to approach such an organisation to auspice their activity.

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The auspice organisation will take full legal and financial accountability for the activity and will be ultimately responsible for acquitting the funding.

You will need to provide written agreement (Letter or Email) from the auspicing organisation, stating that they accept full legal and financial accountability for the activity.

Auspice Organisation *

Organisation Name

Auspice Phone Number.

*

Must be an Australian phone number.
Please include the area code.

Auspice Mobile Number

Must be an Australian phone number.

Auspice Email *

Must be an email address.

Auspice Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Auspice Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Auspice Website

Must be a URL.

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

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

Auspice Supporting Documentation

Please upload the written agreement from your auspice *

Attach a file:

Please upload your Auspice evidence of Incorporation, Constitution, Charter as a Not-for-Profit Organisation *

Attach a file:

Not-for-Profit (NFP) - An organisation is not-for-profit if it is not carried on for the profit or gain of its individual members. This applies for direct and indirect gains, both while the organisation is being carried on and on its winding up. We accept an organisation as not-for-profit if its constitution or governing documents prohibit distribution of profits or gains to individual members and its actions are consistent with the prohibition. NB. If council is unable to establish an organisation's not-for-profit status, additional evidence may be requested following the submission of an application.

Please upload your Auspice Public Liability Insurance Certificate of Currency *

Attach a file:

Other Council Support Received

* indicates a required field

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. Do not list cash or in-kind support you are applying for in this application form in this section (please refer to the Activity Budget section).

Does the applicant, applicant organisation or auspice organisation currently receive any other support from Townsville City Council? *

Yes

No

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Relevant to the current financial year.

| 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, Librar) | For example: Peppercorn lease, fee-waivers, financial support, in-kind support, other grant funding etc | Must be a dollar amount. |
| | | \$ |
| | | \$ |
| | | \$ |

Your Activity

* indicates a required field

How many years are you requesting funding for?

*

Must be a whole number (no decimal place) and between 1 and 3.

Is this a New or Existing Activity? *

New

Existing

Has this activity been run in the past or is this the first for this activity?

Project Title *

I.e. Broadbean Beach Community Skill building Workshops 2024/2025

Project Hero Image

Attach a file:



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

Short project description

*

Word count:

Consider this your sales pitch for your activity. Provide a short description (100 words recommended) of the activity you are seeking funding for. Be clear and concise and keep details relevant to the activity itself

Start Date *

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It is recommended to allow a minimum of 45 days for assessment of your application. Please take into consideration grant processing timeframes and what grant funds will be used for when working out your start date (Grant funds cannot be spent prior to applicant receiving approval as this is deemed retrospective).

End Date *

Activities that are not requesting multi-year funding must be completed within 12 months of the start date listed above.

Activities

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").

To add additional activities, press + (next to the Location Bar)

| Activity | Start date | End date | Location |
|---|---|---|---|
| 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 location is 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 project/program

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

How many people will be involved in your activity as:

| | |
|--|-------------------|
| | Must be a number. |
|--|-------------------|

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| | |
|--------------|--|
| Participants | |
| Attendees | |
| Volunteers | |
| Paid Workers | |
| Other | |

Of the total number of attendees you are estimating, how many are you expecting to be from Out of Town?

How many people are you expecting to attend or participate in your activity that are from outside of the Townsville Local Government Area

Total Activity Attendance

Total number of people involved with your activity in year one

This number/amount is calculated.

Activity Fees

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

Yes

No

What is the cost per person to attend your activity?

Must be a dollar amount.

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.

Provide the attendance numbers you hope to attend for Year 1 of funding

Total amount of Income from Participation/ Attendance Fees

This number/amount is calculated.

Funding Specifics

Cash Funding

| Year of Funding | Activity Start Date | Activity End Date | Total Amount of \$ cash Requested (Excl. GST) |
|-----------------|---------------------|-------------------|---|
|-----------------|---------------------|-------------------|---|

| | | | |
|--|--|--|----|
| | | | \$ |
| | | | \$ |

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| | | | |
|--|--|--|--------------------------|
| | | | \$ |
| | | | Must be a dollar amount. |

Total amount of cash you are requesting from Council in this multi-year agreement (Excl GST)

\$

This number/amount is calculated.

Fee Waivers

| Year of Funding | Activity Start Date | Activity End Date | Amount of Fee Wavier Requested (Excl. GST) |
|-----------------|---------------------|-------------------|--|
|-----------------|---------------------|-------------------|--|

| | | | |
|--|--|--|--------------------------|
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | Must be a dollar amount. |

Total Amount of Fee Waiver

Total value of Fee Waivers requested for this grant (excluding GST):

\$

This number/amount is calculated.

Total Value of Multi-Year Grant Request

Total value of your grant request (excluding GST):

\$

This number/amount is calculated.

This is the total value of the funding requested plus the venue hire waiver requested

Activity Budget (excluding GST) Year 1 Only

* indicates a required field

The below section will relate to the first year of your activity.

The Community Organisation Partnership Program focus on enabling successful activities through the provision of annual or multi-year funding.

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

- Less than or equal to \$5,000
- \$5001 to \$25,000
- \$25,001 to \$50,000

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

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Which funding band are you applying for? *

- Up to \$5,000
- \$5,001 to \$25,000
- \$25,001 to \$50,000

Proposed Partnership Expenditure (excluding GST) Year 1

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 GST exclusive
 - [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 Organisation Partnership Guidelines](#) for ineligible expenditure.

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

| Description of items | \$ Amount requested to be funded by this grant (Excluding GST) | Quote Upload |
|--|---|---|
| e.g. venue hire, equipment hire, external facilitator fees, marketing, etc | All budget figures entered into your application must be GST exclusive. Must be a dollar amount. | All items over \$100 require quotation from Supplier. |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |

Total Amount of Cash you are requesting from Council

\$
Must be a dollar amount.

Further Council Support (In-kind) Year 1

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

- Yes
 - No
- You must enter your Council Venue fee waiver amount, Excluding GST here (Year 1)

Venue Hire Cost Breakdown Year 1

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Venue Hire Amount Requested to be Waived (Excluding GST) *

Must be a dollar amount.
The value of any council fees you are asking council to waive (refer to your council venue quote)

Venue Hard Costs (Staffing, Cleaning, Security etc) Requested to be Waived (Excluding GST) *

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:

Organisation or Partner Contributions

Will your organisation or partner organisation (s) be making any contributions?

Yes

No

This could be additional funding or in-kind support (including from your organisation)

Other Partner Contributions (excluding GST)

Tell us about any other support your project 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.

| Partner Name | In-kind or Cash Support | What Type of Support Are They Providing? | Amount of Support (\$) | Is This Support Confirmed? | Letter of Support |
|---------------------------------|--|--|--------------------------|--|---------------------------------------|
| Individual or Organisation Name | Use two separate entries if partner is providing both. | e.g. venue hire, prizes, equipment, staffing | Must be a dollar amount. | Say No unless the partner has provided a letter of support | If confirmed, include any evidence of |

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| | | | | confirming contribution | partnership support here. |
|--|--|--|----|-------------------------|---------------------------|
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |
| | | | \$ | | |

Total Partner Contributions (excluding GST)

\$

This number/amount is calculated.

Total Grant Value Requested from Council Year 1

This is the Total Grant Value you are requesting from Council for Year 1 (Cash and Fee Waiver - Excluding GST)

\$

This number/amount is calculated.

Activity Cost per attendee/participant Year 1

This number/amount is calculated.

Assessment Criteria

* indicates a required field

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 Organisation 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:

Less than or equal to \$5,000

1. Public Acknowledgement of Council Contribution

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- 2.Social Inclusion
- 3.Liveability
- 4.Sustainability

\$5001 to \$25,000

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

Contribution To City

Describe how your activity will provide benefit and contribute to Townsville LGA?

*

Word count:

Must be no more than 300 words.

Provide a clear explanation of how your activity/s align with one or more of Council's corporate plan goals. Information provided justifies how the activity/s will support increased community participation, advocacy, capacity building and physical contribution. Propose metrics to show how outcomes will be measurable and tracked at closure.

Economic Return

Describe how your activity will bring economic benefit to Townsville LGA? *

Word count:

Must be no more than 300 words.

Provide clear explanation how your activity/s will provide at least two of increased economic activity, tourism, number of overnight stays, or investment. Provide clear information on target outcomes delivered by the activity/s to Council and/or Townsville LGA. Provide a robust approach to deliver on the outcomes which aligns with your activity. Provide clear information on the economic impact as result of your activity. Provide clear evidence to show how your activity/s can translate to projected impacts.

Participation Rates

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

Word count:

Must be no more than 300 words.

Provide clear explanation on how your activity/s will support one or more of Council's corporate plan goals related to participation. Provide clear information on how your activity will provide short term and long term positive impact/s to the community and/or Townsville LGA. Provide clear information on how succesful outcomes can be measured with metrics provided.

Public Acknowledgement of TCC Contribution

Describe how you will best represent Council's values, vision, and mission as part of the activity? *

Word count:

Must be no more than 300 words.

Provide clear explanation as to how Council values, vision, and mission will be represented as part of activity delivery. Demonstrate clear consideration as to how Council representation can be included as part of activity delivery, supported by evidence of planning. Evidence significant planning of council acknowledgement to be included as part of activity delivery.

Social Inclusion

Describe how this activity will improve diversity, community cohesiveness and engage minority groups to promote social inclusion in Townsville LGA? Describe an ideal outcome of social inclusion *

Word count:

Must be no more than 300 words.

Provide clear explanation as to how your activity will improve more than one of the following: diversity, representation of minority groups, and community cohesiveness. Provide clear explanation on what outcomes can be achieved as a result of your activity. Provide clear traceability as to how your activity/s will be able to generate the target outcomes.

Liveability

Describe the lasting benefit this activity will bring to the community within Townsville LGA? *

Word count:

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Must be no more than 300 words.

Provide clear explanation outlining how your activity will provide lasting benefit to the community across at least two of the following: improved health, improved liveability, reduced anti-social behaviour. Provide clear explanation as to how your activity/s will be able to generate the targeted benefits and provide key measures to track all predicted benefits.

Sustainability

Describe how this activity will support the growth of Townsville? *

Word count:

Must be no more than 300 words.

Provide clear explanation how your activity will support increased financial well-being through two or more of: greater collaboration, diversification of industry, expansion of Townsville LGA's business operations, and/or decreased future reliance on Council for future funding. Provide clear evidence that your activity/s will result in targeted outcomes for Townsville LGA.

Activity Outcomes

Outcomes

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/or intermediaries) of your project. 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).

| Your outcomes | Timeframe | Alignment with our outcomes | How does your intended outcome link to our outcomes? |
|---|--|---|--|
| What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row. | When do you expect this outcome to emerge? | Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. No more than 1 choice may be selected. | Please explain how your intended outcome helps contribute to ours. |
| | | | |

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| | | | |
|--|--|--|--|
| | | | |
| | | | |

Metrics

A metric is a measurement designed to indicate whether or not progress towards an outcome is occurring and quantify the extent to which it is occurring.

Here we would like you tell us which of our quantitative metrics you may be able to report on to.

| Metric | Target | Collection method |
|---|---|--|
| Which of our metrics (if any) will you track? You may be required to report on your progress. Add more rows if you want to list additional metrics. | Identify a target for the metric you have chosen - an estimated total for your project. Must be a number. | How will you collect and verify the data? E.g. survey, interviews/ case studies, focus groups, administrative data (e.g. case management data), observation/ estimation, government or public dataset (e.g. Census), other datasets. |
| | | |
| | | |
| | | |

Supporting Documents (applications over \$5,000)

* indicates a required field

Financial Statement

Please upload the audited Financial Statements approved at your most recent Annual General Meeting *

Attach a file:

Supply an audited financial statement approved at most recent Annual General Meeting (AGM); or non-audited financial statements if you are a Small Incorporated Association as defined by the Queensland Government Office of Fair Trading, and are not required to complete a full audit under another law.

Risk Management Plan

Please upload your risk management plan *

Attach a file:

Project Plan

Please tell us about the administrative stages you expect to pass through as part of your project. You may use this table **OR** upload your own project plan below. Extra rows can be added to the table as required.

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| Project Stage | Expected Date of Completion | Current Status |
|---|--|---------------------------------------|
| One per row. e.g. Planning; recruitment; evaluation. Add more rows if you want to list additional milestones. | Leave blank if date is unknown or not relevant. Must be a date. | What is the status of this milestone? |
| | | |
| | | |
| | | |

Upload your project plan here:

Attach a file:

Additional Supporting Documents (optional)

Please upload any additional supporting documents you wish to provide

Attach a file:

Certification, Submission and Feedback

* indicates a required field

Certification Statement

- I confirm that I am an appropriately authorised person on behalf of the applicant organisation.
- I certify that to the best of my knowledge the statements made within this application are true and correct.
- I am aware of what can and can not be purchased using this grant.
- I understand this is an application only and may not result in funding approval.
- I understand that if approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the funding agreement.

I agree *

Yes

No

Name *

First Name

Last Name

Position *

Submitting the application

23/24 Community Organisation Partnership Application Form

Form Preview

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 Councils 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.*

Feedback

Before you review and submit your application, please consider providing us with feedback about your experience with the grant application process.

This feedback is optional.

I found the online application process....?

Very easy Easy Neither easy nor difficult Difficult Very difficult

What improvement could be made to the application process?