19/20 Social Grant and Partnership Application
Form Preview

Welcome & Eligiblity Check

* indicates a required field

Welcome to our Social Grants & Partnerships application form. Please be sure to read the guidelines and factsheet before completing your application.

The value of your total request is determined by how much funding you ask for, plus any in-kind support you ask council to provide.

Depending on the value of your total request, your application will follow a different assessment process*:*

Grants $5,000 and under:

- Apply at any time.
- Once an application is lodged and is deemed eligible and complete by Council, the assessment time period of 4 weeks will commence.
- Please note that the initiative you are seeking support for must not commence sooner than 2 weeks after the stated assessment timeframe.

Grants $5,001 - $25,000:

- Applications must be submitted by 11:59pm on 1 August 2019, 14 October 2019, 30 January 2020 and 30th April 2020. (Note: Please note these dates may change at Councils discretion, please refer to Councils website for the most recent dates)
- Your application will be assessed within 8 weeks of the closing dates listed above.
- Please note that the initiative you are seeking support for must not commence sooner than 2 weeks after the stated assessment timeframe.

Partnerships Greater than $25,000:

- Apply at any time
- Once an application is lodged and is deemed eligible and complete by Council, the assessment time period of 8 weeks will commence.
- Please note that the initiative you are seeking support for must not commence sooner than 2 weeks after the stated assessment timeframe.

Eligibility Checklist

Please confirm that you (the applicant):

- have read and understood the program guidelines.
- can demonstrate alignment between your initiative and your selected Townsville City Grants and Partnerships priority.
- are a properly constituted not-for-profit organisation, or are auspiced by such an organisation.
- reside and/or primarily provide services within the Townsville Local Government Area (LGA), or are able to demonstrate that the initiative is in the public interest of residents of the Townsville LGA.
- are free of debt to Townsville City Council.
- have acquitted any previous Townsville City Council grant satisfactorily.

- hold a Certificate of Currency - Public Liability Insurance to the value of $20,000,000 per claim.

You must confirm that all statements above are true and correct, please select below: *

○ Yes ○ No

You must confirm that all statements above are true and correct

Thank you for visiting our Townsville City Grants and Partnerships program. As you have selected "No" to the eligibility checklist you will not be able to proceed with your application.

Please contact the Grants and Partnerships Team for more information on 13 48 10.

Applicant Details

* indicates a required field

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.

Applicant Name *

○ Individual ○ Organisation

Organisation Name

Title 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, ACNC or ATO. Individuals must be auspiced by a properly constituted, not-for-profit organisation

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

Website

Must be a URL.

Please confirm that you are a properly constituted, not-for-profit organisation: *

○ Yes ○ No, I require an auspice

Please provide evidence of your 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.

Do you have an ABN? *

○ Yes ○ No

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.

Primary Bank Account *

Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

As you do not have an ABN, please submit a completed Statement by Supplier Form with your application. Download the form from the ATO

Please upload a completed Statement by Supplier Form *

Attach a file:

Bank Account *

Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

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 initiative.

The auspice organisation will take full legal and financial accountability for the initiative 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 initiative.

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.

Is your auspice an incorporated organisation? *

○ Yes ○ No

Please confirm that your auspice is a properly constituted, not-for-profit organisation: *

○ Yes ○ No

This application can not proceed until you are auspiced by a properly constituted, not-for-profit organisation.

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.

Auspice Bank Account *

Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Please upload the written agreement from your auspice *

Attach a file:

Social Priority

* indicates a required field

Which Social priority does your initiative align with? *

- ○ Boost Townsville's art and cultural experience
- ○ Build a community that is safe and resilient
- ○ Support multicultural diversity and community inclusiveness
- ○ Develop healthy and active lifestyles
- ○ Grow the capacity of Townsville through shared knowledge and learning

Please visist our website for more information about the Social priorities.

Your Initiative

* indicates a required field

Initiative Details

InitiativeTitle *

Please provide a brief description of your initiative: *

Word count:
no more than 200 words

What is the primary location of your initiative? *

This is the location of an event, facility, street address etc.

Initiative Start Date *

Must be a date.
Your intiative cannot commence prior to recieving your notification from Council. Refer to the guidelines for timeframes.

Initiative End Date *

Must be a date.

How many community members do you expect to benefit from your initiative? *

Must be a number.
How many people do you expect to attend your event, participate in your initiative, etc.

Budget

All budget figures must be **GST exclusive.**

If you are registered for GST, 10% will be added to your grant upon payment.

Income

Please ensure that the first line of your income table is the amount of cash funding you are requesting from Council (Townsville City Council) through this application. This figure will appear in the "Calculated Totals" below your expenses table (not including fee waiver).

Indicate whether your income from other sources is confirmed by selecting 'yes' or 'no' from the drop down list.

Expected income may include:

- **Other grants** - Australian or Queensland government, Foundations, Philanthropic organisations and other grantors.
- **Earned income** - product sales, ticket sales, workshop fees, partner contribution.
- **Your own contribution** - cash, equipment, in-kind support.
- **Sponsorships, fundraising and donations** - crowd funding, operational support or other cash.

Income Description	Income Amount (excluding GST)	Income confirmed
Townsville City Council	$	
	Must be a dollar amount.	

Total Income Amount (exlcuding GST)

$

This number/amount is calculated.

Expenditure

In this table, you should list all planned expenditure items for your initiative.

Please identify which items you are seeking Council funding for, by placing the requested amount in the last column. This column should total the amount of cash support you are requesting from Council in this application.

Note: If you are not requesting funding for every expense item, you can leave the last cell blank or type '0'.

Expenses may include:

- **Production and development costs** - hire fees, venue fees, workshops, consumables and materials directly attributable to the initiative.
- **Promotion, documentation and marketing costs** - design, printing, distribution, photography and marketing.

Supplier	Description of items	$ Expenditure amount (excluding GST)	$ Amount requested to be funded by this grant (Excluding GST)
		$	

		Must be a dollar amount.	Must be a dollar amount.

Total expenditure (excluding GST)

$
This number/amount is calculated.

Quotes

Please upload quotes here

Attach a file:

You are only required to upload quotes from suppliers for $1,000 and over (GST exclusive)

Calculated totals

This is your total income minus total expenditure (excluding GST). It has been calculated to help you check if your budget is balancing:

$
This number/amount is calculated.

This should equal the total cash support you are requesting from Council (excluding GST). This figure should also be reflected in the first line of your income table.

$
This number/amount is calculated.

Other support from Council

As part of your initiative are you seeking other in-kind support from Council? *

○ Yes ○ No

Venue hire waiver requested (excluding GST): *

$
Must be a dollar amount.
Hint: What is the hire fee on your Council venue quote? If you are not requesting a waiver, please enter '0'

Total Value of 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

Please use the above figure to select the correct funding band for your application: *

- ○ Less than or equal to $5,000
- ○ $5,001 - $25,000
- ○ Equal to or greater than $25,001

Please use the figure which has been calculated for you in the 'Total Value of Grant Request'

Project Plan

Please provide a project plan outlining the key stages in your initiative, including key engagement and collaboration activities. You may use this table **OR** upload your own project plan below. Extra rows can be added to the table as required.

Project Stage	Finish Date	Further Comments
e.q. planning; major activities; evaluation	Provide approximate date	Add explanatory notes if required Must be no more than 50 words.

Upload your project plan here:

Attach a file:

Assessment Questions

* indicates a required field

Tell us how your initiative will support the identified grant priority *

Word count:
no more than 300 words
Hint: You should describe in detail how your initiative contributes to the aim of the priority you have selected. Use examples of evidence and research to support your answer.

Tell us how your initiative will benefit the community *

Word count:
no more than 300 words
You should describe who will directly benefit from this initiative (target audience) and in what way they will benefit. Clearly set out what the needs are of the audience, using examples of evidence and research. Also explain the benefit to the wider community.

More specifically, tell us what outcomes your initiative will produce.

You may add extra rows to this table as required.

Outcomes are the changes you expect to occur as a result of your initiative. For example, an increase or decrease in one or more of the following:

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

Short-term outcomes occur directly following an initiative (e.g. within 1 month); medium term outcomes occur between 1 month and 2 years after an initiative; and long-term outcomes are those we expect to see years later (e.g. 2 or more years after the initiative).

Outcomes can be measured using a variety of methods, such as surveys, interviews, or focus groups.

Anticipated Outcomes	Timeframe	How will you measure this?
Outcomes are the changes that you expect to occur as a result of your initiative - e.g. "a 15% reduction in youth incarceration"	Please see above - e.g. "medium term"	Indicators are what you will use to measure the outcome - e.g. "an increase in youth counselling sessions from x to y"

Tell us how you will work with the community and other organisations in the development and delivery of this initiative *

Word count:
Must be no more than 300 words.

Hint: You should provide evidence of, or set out your intended plan to undertake, engagement with your target audience. Describe your key stakeholders and/or evidence of collaboration with other organisations in the development and delivery of your initiative, where relevant.

Tell us how your organisation has the capacity to deliver this initiative

Word count:
Must be no more than 300 words.
You should provide evidence of sufficient staffing and resource capability and knowledge to deliver the initiative. Set out any previous grant delivery experience.

Tell us how the benefits gained from this initiative will be sustained *

Word count:
Must be no more than 300 words.
Hint: You should describe other delivery models, alternative initiatives or other funding sources to sustain the intended benefits gained from this initiative. Provide evidence or research to support this. Where appropriate set out a clear exit strategy.

Additional Supporting Documents

* indicates a required field

Please upload your Public Liability Insurance Certificate of Currency *

Attach a file:

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

Attach a file:

Please upload any supporting documents you wish to provide

Attach a file:

Certification

* indicates a required field

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, and I understand that if the applicant is 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 * Title | First Name | Last Name

Position *

Please tick here if you do not want to receive updates from Townsville City Council's Community Engagement team, including information regarding future grant rounds. ○ I do not want to receive updates