

Community Grant Scheme

**Application Form 2022-23**

**Deadline Round 1 4pm Wednesday, 14 September 2022**

**Deadline Round 2 4pm Wednesday, 8 February 2023**

Please read the Community Grant Scheme Guidelines carefully and speak to the Community Development Officer before completing an application.

Contact 9887 1066 or **admin@pingelly.wa.gov.au** for further information or assistance.

**Please submit this application via one of the following:**

**Mail/In person**

Shire of Pingelly

17 Queen Street, Pingelly 6308

**Email**

admin@pingelly.wa.gov.au

**Eligibility**

|  |  |  |
| --- | --- | --- |
| Eligible applicants must be either: * an individual/club/organisation; or
* A Pingelly resident

Ineligible applicants include:* an organisation/individual (or individual associated with an organisation) which failed to acquit previous Shire of Pingelly funding; or
* an organisation/individual (or individual associated with an organisation) which has already received the maximum allocation of funding from the Community Grant Scheme in the same financial year.
 | 🞏 Yes | 🞏 No |
| Projects meets priority areas identified within the Shire’s Community Strategic Plan, and include, but are not limited to the following areas:* building capacity within local community groups, volunteers and residents;
* supporting our young people;
* supporting our older people;
* providing opportunity to be healthy and promote wellbeing;
* supporting and encouraging cultural diversity and inclusion;
* developing and attracting art projects and increasing participation; and
* generally building the strength, engagement and cohesion of the community.
* Encourage tourism and increase visitation;
* Activate local businesses and main streets; and
* Improve, conserve and promote heritage.
 | 🞏 Yes | 🞏 No |
| For applications to proceed to assessment they must:* be lodged on time;
* be submitted on the appropriate form;
* include the required information, including insurance and financial details;
* include agreement from the applicant to acknowledge the Shire if funding is successful;
* ensure the applicant demonstrates its ability to manage the project; and
* not be due to commence until after the notification date.
 | 🞏 Yes | 🞏 No  |

**If you answered ‘No’ to any of these questions, please contact the Community Development Officer.**

**Applicant Details**

This is the details of the individual or organisation applying for the Community Grant.

|  |  |
| --- | --- |
| Name  |  |
| Postal Address |  |
| ABN (if available) |  |
| Registered for GST | 🞏 Yes 🞏 No |
| Not-for-profit | 🞏 Yes 🞏 No |
| Incorporated | 🞏 Yes 🞏 No |
| Individual | 🞏 Yes 🞏 No |

**Contact Details**

This is the contact details of the individual or organisation applying for the Community Grant. If the applicant is an organisation, the contact details should be the president, chairperson or secretory.

|  |  |
| --- | --- |
| Name |  |
| Position (if organisation) |  |
| Telephone |  |
| Email |  |

**Project Details**

Which category best describes your community project?

🞏 building capacity within local community groups, volunteers and residents

🞏 supporting our young people

🞏 supporting our older people

🞏 providing opportunity to be healthy and promote wellbeing

🞏 supporting and encouraging cultural diversity and inclusion

🞏 developing and attracting art projects and increasing participation

🞏 generally building the strength, engagement and cohesion of the community

🞏 encourage tourism and increase visitation

🞏 activate local businesses and main streets

🞏 improve, conserve and promote heritage

Project name

|  |
| --- |
|  |

Provide a summary of the project

|  |
| --- |
|  |

Clearly identify what the grant funds will be used for in the project

|  |
| --- |
|  |

Which are your main target groups?

* General community
* Children 0-10
* Youth 11-25
* Women
* Men
* Seniors
* Aboriginal or Torres Strait Islander people
* People with disabilities and/or carers
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe how the project will benefit those participating and the community of Pingelly

|  |
| --- |
|  |

Provide details of any collaborations/partnerships or community groups that will assist in the delivery of this project and outline how they will support the project (provide letters of support where relevant).

|  |
| --- |
|  |

Anticipated commencement date

|  |
| --- |
|  |

Anticipated completion date

|  |
| --- |
|  |

How will you acknowledge the Shire of Pingelly’s contribution to the project?

|  |
| --- |
|  |

**Budget Details**

Use the table below to list the expenses your project will incur, detail the income and in-kind that will cover the expenses, and identify their source.

Please note Shire of Pingelly’s contribution is limited to 75% of the total project, and no more than $3,000.

|  |
| --- |
| **Income** |
| **Income Items**  | **Amount**  |
| Shire of Pingelly Community Grant Scheme Funding | $ |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Project Income** |  |
| **In Kind Contributions** |
| **In Kind Items** | **Amount**  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total In Kind Contributions** |  |
| **Expenditure** |
| **Expenditure Items** | **Amount** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Project Expenditure** |  |
| **Total Project Cost (Total In Kind + Total Expenditure)** |  |

Has you received any type of funding from the Shire of Pingelly in the last 2 years? If yes, please provide details below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **Amount** | **Purpose** | **Fully Acquitted** |
|  |  |  | 🞏 Yes 🞏 No |
|  |  |  | 🞏 Yes 🞏 No |

Have you applied for grant funding from other sources for this project? If yes, please provide details below.

|  |  |  |
| --- | --- | --- |
| **Funding Body/Program** | **Amount** | **Status of Application** |
|  |  | 🞏 Confirmed 🞏 Pending |
|  |  | 🞏 Confirmed🞏 Pending |

**Declaration**

🞏 I declare the organisation has read and understands the Community Grant Scheme Guidelines.

🞏 I declare I am the authorised person to submit this application on behalf of my organisation and are authorised to sign legal documents on behalf of the organisation.

🞏 I declare the information provided in this application and attachments is to the best of my knowledge true, correct and discloses all estimates as accurate as possible.

🞏 I understand false or misleading statements listed in this Community Grant Scheme Application can result in the application being rejected or the withholding of any funds that may be approved as result of this application.

🞏 I declare the organisation applying for the grant funding will complete and submit a Community Grant Scheme Acquittal Form within 30 days following the project’s completion.

🞏 I declare the organisation submitting this form understands this is an application only.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Position |  |
| Signature  |  | Date |  |

**Application Checklist**

🞏 Contacted the Community Development Officer to discuss the proposed project and application.

🞏 Completed all questions in the application form

🞏 Ensured any attached documents to your application are clearly marked and are in a clear and easy to understand format.

🞏 Annual financial statement attached for project amounts over $1,000

🞏 Evidence of public liability insurance

🞏 Letters of support, including letter of support from auspice organisation (if applicable)