Community Assistance Partnership Fund

Shire of Murray

Organisation Details

Organisation name `Required`

Postal address `Required`

Contact person `Required` Person completing this application

Position `Required`

Contact number `Required`

Contact email `Required`

Is your group/organisation registered for GST? (Select 1 option) `Required`

○ Yes

○ No

Does your group/organisation hold current public liability insurance? (Select 1 option) Required

○ Yes

○ No

Answer this question if you selected 'Yes' in *Organisation Details > Does your group/organisation hold current public liability insurance?*

Upload Certificate of Currency for Public Liability Required

📎 Please attach all files to the end of this form before submitting it.

Is your group/organisation incorporated? (Select 1 option) Required

○ Yes

○ No

Answer this question if you selected 'Yes' in *Organisation Details > Is your group/organisation incorporated?*

Incorporation number Required

How many members and/or volunteers does your group/organisation have? Required

Briefly describe the primary activities your group/organisation undertake Required

Project Details

Project name Required

Project start date

| D | D | M | M | Y | Y | Y | Y |

Project end date

| D | D | M | M | Y | Y | Y | Y |

Where will the project take place? Required

Total project cost (ex GST) Required

Total funding requested (ex GST) Required

Project Justification

Provide a brief description of the project, including purpose and practical plan for implementation Required

Indicate how the project aligns with our Murray 2030 Strategic Community Plan, addressing at least one of the folllowing key priority areas: (Select at least 1 option) `Required`

- [ ] Building the capacity and sustainability of community groups
- [ ] Encouraging community engagement and participation in community life or activation of places and facilities
- [ ] Encouraging social inclusion
- [ ] Protection of our environment
- [ ] Supporting development of and participation in arts and culture
- [ ] Promoting increased physical activity
- [ ] Supporting a safe and healthy community
- [ ] Increasing support or services to priority target groups, including families, children, youth, seniors indigenous, culturally diverse backgrounds and people with disability or from low socio-economic background
- [ ] Developing the growth of youth through leadership and education

Provide detail on how the project will address the key priority areas selected above `Required`

How has the need for this project been identified? `Required` For example - member or community survey or feedback, community meeting.

How will this project address this identified need within the community? `Required`

Community Benefit

How will this project benefit community members or target groups? `Required`

Provide details of target group/s and estimate the number of community members who will benefit from this project.

Will this project make use of volunteers? (Select 1 option) `Required`

○ Yes

○ No

Answer this question if you selected 'Yes' in *Community Benefit > Will this project make use of volunteers?*

How many? `Required`

Answer this question if you selected 'Yes' in *Community Benefit > Will this project make use of volunteers?*

Estimate the amount of volunteer support (in-kind hours) `Required`

Project Delivery

Indicate the level of support from local business and/or government authorities `Required`

Do you have support from your local community group/progress associaton? (Select 1 option) `Required`

○ Yes

○ No

Answer this question if you selected 'Yes' in *Project Delivery > Do you have support from your local community group/progress associaton?*

What level of support do you have? Required

Answer this question if you selected 'Yes' in *Project Delivery > Do you have support from your local community group/progress associaton?*

Upload support documentation E.g. letter of support, testimonials.

📎   Please attach all files to the end of this form before submitting it.

How will the event be promoted to the community? Required

Detail how you intend to acknowledge the Shire of Murray and Alcoa of Australia, if funding is approved.

You will need to demonstrate how both organisations will be acknowledged for their contribution towards the project as part of the grant acquittal requirements.

What is your group/organisation's or officer/volunteer's capacity, skill and experience in delivering this project? Required

Provide an approximate timeline of major project milestones Required

Project Budget

Your group/organisation's contribution (ex GST) Required

Other grants/sponsorship Provide name of each funder and contribution amount (ex GST)

Fees/charges to participants

Expenditure (ex GST) Required Detail items and associated cost (ex GST). This should equal the total amount of funding requested.

Upload your own spreadsheet indicating income and expenditure Ensure it clearly depicts the various items.

📎 Please attach all files to the end of this form before submitting it.

Upload quotes If over $1,000

📎 Please attach all files to the end of this form before submitting it.

Payment Details Bank account details for electronic transfer of grant monies (if successful).

Account name Required

BSB number Required

Account number Required

Bank name Required

Bank branch Required

Application Declaration

This section must be completed by an individual with authorised delegation of the group/organisation (President, Chief Executive Officer or similar).

Conditions:

- Shire of Murray staff have been consulted in the development of this application
- This project is not retrospective and will occur at least eight weeks after the funding round closes, allowing time for the project to acknowledge funding+
- Funding assistance provided by the Shire of Murray will be acknowledged in any promotional material, advertising or other public documents relating to the project
- All Local, State and Commonwealth laws applicable to the approved project will be complied with
- The grant will be used solely for the specified purpose approved by the Shire of Murray
- Final acquittal report and a full statement of income and expenditure demonstrating how the grant funds were utilised, to be provided to the Shire of Murray

I certify that:

- This application is, to the best of my knowledge, true and correct
- On behalf of the applicant group/organisation, I have read, accepted and will comply with the Community Assistance Partnership Fund conditions above

Name Required

Position Required

Signature Required

Required

| D | D | M | M | Y | Y | Y | Y |

End of form

Don't forget to attach all files before submitting this form