### Surf Coast Shire Council's Community Initiatives Grants

\* indicates a required field

### Introduction

Thank you for your interest in Surf Coast Shire Council's Community Initiatives grant stream. This grant stream is open in March and September annually.

Grants of **up to \$5,000** are available and applicants must contribute a minimum of **30%** (cash or in-kind) towards the total project cost.

If you need an interpreter, please call the Translating and Interpreting Service (TIS National) on 131 450 and ask them to telephone the Surf Coast Shire on 03 5261 0600. Our business hours are 8.30am-5.00pm

Online applications will close at midnight on **31 March 2025.** Incomplete applications and/ or applications received after this closing date will not be considered.

### Before applying

- 1. Read the **<u>guidelines</u>** and check your eligibility.
- 2. Call our Grants team on 5261 0600 to discuss your idea and ask any guestions.

## Eligibility - Before you commence your application

Important, please confirm before proceeding:

Please ensure you have read the Surf Coast Shire Community Initiative Grant Guidelines and have contacted the Surf Coast Shire Grants Officer before completing this application.

By submitting this application, you confirm that you understand the eligibility criteria in the guidelines.

I confirm I have read	and can comply	y with all of th	he eligibility	requirements	listed
above *					

- Yes
- No Please do not proceed.

### Name Council Officer you have discussed the proposal with:

## **Applicant Details**

\* indicates a required field

**Group Name \*** 

Organisation Name
Contact Person * Title First Name Last Name
Postal Address Address
Suburb State Postcode
Phone Number *
Email *
Organisation Type
<ul> <li>□ Incorporated as a not for profit</li> <li>□ Unincorporated not for profit organisation (you will need to seek an Auspice)</li> <li>□ Individual (you will need to seek an Auspice)</li> <li>□ Other</li> </ul>
If other, please specify:
Incorporation Number if required
Please enter your incorporation number
Enter your organisation's 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

**More information** 

Goods & Services Tax (GST)

DGR Endorsed ATO Charity Type

ACNC Registration	
Tax Concessions	
Main business location	
Must be an ABN.	
If successful in receiving a grant, organisations that do not have an ato complete a Statement by Supplier form. If you don't have an ABN form, Council may be obliged to withhold 46.5% of your grant payment.	and don't provide this
ATO Statement by Supplier form	
Please upload ATO Statement by Supplier form if applicable Attach a file:	
Auspice Details	
Auspicing allows not-for-profit, incorporated organisations to accept of individuals or groups who are not incorporated. They will have find the project.	
If you or your organisation is being auspiced, please provide the det organisation below.	ails of the auspice
Auspice Organisation Organisation Name	
Auspice Incorporation Number	
Auspice Organisation ABN	
The ABN provided will be used to look up the following information. check that you have entered the ABN correctly.	Click Lookup above to
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.		1
	our auspice organisation whice and accept funding on your be	
Insurance		
activity being undertaken) must	urance (proportionate to the risk a be provided. Generally if your proje bility of the applicant, not the ausp ation.	ect is auspiced, public
Please attach a copy of the C Attach a file:	ertificate of Currency	
Financial Details		
Please attach a copy of your eattach a file:	group's latest financial report	
If you would like to expand or please do so here:	n any information contained in	your financial report,
Key Project Details		
* indicates a required field		
What is the name of your pro	ject/event? *	
Which ward will your project/ ☐ Torquay ☐ Otway Ranges ☐ Winchelsea	event take place in? *	

For a map of current ward boundaries click here

Please note, these are the new ward boundaries as of 26 October 2024.
Please provide a brief overview of the project/event: *
Provide a short description (100 words recommended) of your project - what are you out to do?
Total Grant Amount Requested *
\$ Must be a dollar amount.
What is the total (grant) financial support you are requesting in this application?
Total Project Cost *
\$ Must be a dollar amount.
Sum of all expenses incurred throughout the project/event
How many people will your project/event involve? *
Must be a number.  Total number - attendees, workers, volunteers. This can be an estimate.
Which of the following Surf Coast Shire Council Plan themes does your project address?
<ul><li>☐ First Nations Reconciliation</li><li>☐ A Healthy Connected Community</li></ul>
☐ A Healthy Connected Community ☐ Environmental Leadership
<ul><li>☐ Sustainable Growth</li><li>☐ Robust and Diverse Economy</li></ul>
☐ Arts and Creativity
Which of the following Health and Wellbeing focus areas does your project
address?  ☐ Increase Healthy Eating and Active Living
□ Prevents family violence and promotes gender equity
<ul><li>☐ Improves Mental Health and Social Connection</li><li>☐ Tackles the Impacts of Climate Change on Health</li></ul>
□ Reduces harm from Alcohol and other drugs
Assessment Questions

\* indicates a required field

Tell us about your project/event

Please answer the following questions to the best of your ability. Assessment of your application will be largely based on the answers you give on this page of the

**form**. Tips on how to answer these assessment criteria are in the Community Initiatives Guidelines and in the hints boxes which you will see below the text boxes.

The % assigned to each question tells you the weighting of each criterion out of 100.

Applications are assessed against the grant criteria outlined in the guidelines by a panel of Council Officers.

The highest scoring projects will be fully funded and projects that score moderately may be offered partial funding.

Assessment Criteria 1 (30%) - Contributing to a thriving community and environment

Describe the benefits YOUR PROJECT will bring.
What will change for the better because of your project?
WHO will benefit from this project?
Will this project benefit your groups and it's members? Will it benefit other groups or people in our community? If so, whom?
List all the ways YOUR GROUP positively impacts our community and/or environment? (dot points are fine)
For example - does your group create social connection? Inclusion opportunities? Health benefits? Benefits for the environment or the arts?
What do you or your members love most about being a part of your group?
Assessment Criteria 2 (25%) - Project responds to a current
opportunity and/or need
How does your project/equipment respond to a current need or opportunity and assist with your current activities?
e.g. safety, increase membership. Can you provide evidence of need?

List the new connections and/or collaborations that will result from your project

Will other groups be involved?
Assessment Criteria 3 (10%) - Opportunities for volunteers and/or community members to progress or develop new skills
What opportunities will be created to progress/gain new skills? Things that give value to volunteers themselves, or increase safety/functionality of your group, upskill community members.
E.g. first aid training, learning how to use new equipment, cultural awareness
Assessment Criteria 4 (15%) - Ability to deliver project
Describe HOW will you deliver the project? E.g. timelines, tasks, who is responsible for what activity. If you wish to upload a project plan please do so below.
Upload a project plan Attach a file:
Accessors on the Cartesian F (100). Desitives any incomparately extraorded
Assessment Criteria 5 (10%) - Positive environmental outcomes
Does your project have positive environmental outcomes?  ○ Yes ○ No
List the environmental benefits (dot points fine)
e.g. reduces waste, save energy, acts on climate change, protects natural environment
Assessment Criteria 6 (10%) - Budget

Include the amount you are requesting in this application.

Income

Include any other sources of income. Make sure you tell us whether each source is confirmed or not (for example you might have another grant application in the works but that funding is not actually confirmed yet). Examples of other income could include:

- Another grant
- A cash contribution from your organisation (this could come from things like fundraising or donations)
- In Kind contribution from your organisation

### In Kind contributions:

In kind support - refers to the contribution that your organisation provides in lieu of cash that covers some of the project costs. This could be volunteering time, catering, donated materials or equipment.

To CALCULATE your In Kind Contribution:

- Include an approximate value for donated materials and equipment
- Volunteer hours = calculate volunteer hours at \$43/hour (this is usually the volunteer time actually involved in the project implementation) and skilled trades or professional services at \$150/hr (this would include things like architectural, accounting, engineering or skilled trades e.g. plumbing)

Remember it is expected that your group will contribute 30% or approximately one third of the total costs to the project. Ensure you outline this in your budget.

### **Expenditure**

List every item of expenditure. Include the cost of each item. (everything that the money, or In Kind will be 'spent' on)

Please note: if you are registered for GST, all budget items are to be GST exclusive. If you are not registered for GST, all budget items are to be GST inclusive. GST registered businesses will be able to claim the GST on their invoice.

### Income and expenditure need to be equal. Your proposed budget must balance

To look at an example budget Click Here

Source of Income		\$ Income Amount	Confirmed Y/N	<ul><li>Expenditure</li><li>itemize al expenses</li></ul>	<b>IExpenditure</b>
	Ì	\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$

### **Budget Totals**

Total Income Amount Income - Expenditure Amount Income - Expenditure

Quotes				
You must supply	a quote	Attach a file:		
for any equipmen	nt,			
material, activity				
services that the funds will pay fo				
pay 10	•			
Further Inform	nation			
Council collect		to help us analys		. •
the future. It h	as no bear	ing on the assess	sinenic or cins ap	oplication.
		J	silielit oi tilis aț	oplication.
Gender of contac		J	silient of this ap	oplication.
		J	sment of this ap	oplication.
Gender of contact      Woman      Man      Non-binary	t person for	J	sment of this ap	oplication.
Gender of contact      Woman      Man      Non-binary      Prefer not to sa	<b>et person for</b>	this project	sment of this ap	oplication.
Gender of contact      Woman      Man      Non-binary	<b>et person for</b>	this project	sment of this ap	opiication.
Gender of contact      Woman      Man      Non-binary      Prefer not to sa	<b>et person for</b>	this project	sment of this ap	oplication.
Gender of contact      Woman      Man      Non-binary      Prefer not to sa	<b>et person for</b>	this project	sinencoi uns ap	oplication.
Gender of contact      Woman      Man      Non-binary      Prefer not to sa	<b>et person for</b>	this project	sment of this ap	oplication.
Gender of contact      Woman      Man      Non-binary      Prefer not to sa      I use a different	y t term (please	this project specify below)	Male	
Gender of contact  Woman  Man  Non-binary  Prefer not to sa  l use a different	<b>et person for</b>	this project specify below)		Gender diverse/ unspecified
Gender of contact  Woman  Man  Non-binary  Prefer not to sa  I use a different	y t term (please	this project specify below) r of Female	Male	Gender diverse/

Applications are assessed during the months of **April and October.** 

Any questions, contact our Grants Officer, Terri Hannan thannan@surfcoast.vic.gov.au or by phone on 5261 0600

**Privacy Notification** 

Management Committee/ Board membership if applicable

The personal information requested on this form is being collected by Council for a grant application. The personal information will be used solely by Council for that primary purpose or a directly related purpose. The applicant understands that they may apply to Council to access and/or amend the information.