Community Events Funding Program Application

* indicates a required field

Before you continue:

You will need to fully understand the guidelines for the Community Events Funding Program to make sure your organisation's application has the best chance of getting funded.

• Does your project "fit" with Council's funding principles and the program's funding objectives?

 Do you understand how your application will be 	assessed?
Please review the <u>Community Funding and Sup</u> commencing your application. You may also lik <u>Writing Tips'</u> and <u>'Sample Budget Fact Sheet'</u> a Support webpage.	e to look at the resources 'Grant
Is the applicant a Not-for-Profit organisation / (includes Churches and School P&Cs) * O Yes O No	Group / Club or Registered Charity
O res	
As you answered No - your organisation is INEL	IGIBLE for funding.
Please contact the Community Funding and Support communityfunding@ipswich.gld.gov.au or phone (07	
Name of Organisation * Organisation Name Please use your organisation's full name. Check your spelliname that is listed in official documentation such as with the Charities and Not-For-Profit Commission or Australian Tax (he Australian Business Register, Australian
1. Contact Details	
1.1 Contact person for the funding application Title First Name Last Name	*
This is the person we will correspond with about this grant	application.
1.2 Position held in organisation *	
e.g. Manager, Board Member, Coordinator, etc.	

Must be an	n Australian phone n	number.		
1.4 Cont	act Email addre	ss *		
	n email address. address we will use	to correspond with	you about this grant appl	ication.
	is the same con	tact person for t		
○ Yes			○ No	
Who is	the contact po	erson for the e	event?	
	ontact Name *	Look Nows		
Title	First Name	Last Name		
Event Co	ontact Phone Nu	mb o u *		
Event Co	ontact Phone Nu	mber *		
Must be an	n Australian phone n	number.		
Event Co	ontact Email *			
Must be ar	n email address.			
2 Orga	nication Data	ilo		
z. Orga	nisation Deta	IIS		
2.1 Orga Address	nisation's Stree	t Address *		
	1.6.1.1.7			
			Postcode are required.	
2.2 DivisO Division	sion where your on 1	organisation is O Division 3		tside of Ipswich LGA
Division	on 2	Division 4		
	which division	-		
Find out o		ommission of Que	ensland website (go to	the webpage and type in
2.3 Orga Address	nisation's Posta	I Address *		

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

2.4 Organisation	on's Email address *		
Must be an email a	address.		
2.5 Organisatio	on's Website *		
Must be a URL.			
2.6 Organisatio Account Name	on's Bank Account *		
Account Name			
BSB Number	Account Number		
Must be a valid Au	istralian bank account format.		
2.7 Latest Fina Attach a file:	ancial Statement and/or l	atest Annual Report	*
recount a men			
Applicant ABN	*		
	ed will be used to look up th nave entered the ABN correc		Click Lookup above to
Information from	the Australian Business Regist	er]
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services	Tax (GST)		
DGR Endorsed			
ATO Charity Type	More inform	<u>nation</u>	
ACNC Registration	n		
Tax Concessions			
Main business loc	ation		
Must be an ABN.			1
2.0.16			
organisation's	anisation is not incorpor constitution	ated, piease attach a	copy or your
Attach a file:			

2.10 Please attach a copy of your current Public Liability Insurance Certificate or Certificate of Currency *

Attach a file:

The minimum cover required is \$20 million and the Australia. The certificate must be in the name of the	insurance company must be licensed to operate in e applicant.
2.11 Please outline the management struyour organisation's ability/capacity to ma	
For example, please outline the management struc	ture of your organisation and describe your
organisation's ability/capacity to manage communi	
2.12 Does your organisation adhere to so practices? *	ound Workplace Health & Safety
· Yes	○ No
2.13 Does your organisation comply with Legislation including accounting and aud laws, privacy, confidentiality and freedor accredication of professional employees, annual reports? *	liting requirements, antidiscrimination modern of information laws, registration and
○ Yes	○ No
 2.14 Are any of your organisation's Board Ipswich City Council staff? * Yes Council collects this information in accordance with 	○ No
List all Board / Management Committee memb	pers who are Ipswich City Council staff:
Name	Position in your organisation (eg. Secretary, Committee Member, etc)
3. Event Details	
* indicates a required field	
Name of Event *	
Provide the title for your event. Your title should be	short but descriptive.
TELL US AROUT YOUR EVENT	

TELL US ABOUT YOUR EVENT

- What will you do and what activities are involved?
- Who will be involved?
- Why are you holding this event?

3.1 Please provide information about your event (answering the above questions). *
Go to the Funding Centre's Answers Bank at https://explore.fundingcentre.com.au/help-sheets/answersbank if you need some ideas about how to frame your response.
3.2 Type of Event *
 Community Event (eg. Family Fun Day, Multicultural Festival, etc)
Who are the primary beneficiaries of this project/program? *
project, program:
No more than 3 choices may be selected. Please choose only the group/s that are at the very core of this event
3.3 Is this a ticketed event? (Is there a cost to attend?) *
○ Yes - cost is below ○ No
Free to attend but ticket / registration required
Cost of ticket per person *
Please include details of different costs, eg. children, seniors, etc.

How does your project align with Council's strategic outcomes and metrics?

For further information, please see the <u>Community Development Strategy</u> and/or the <u>Active</u> Ipswich Strategy.

3.4 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).

Which of our 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. 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. No more than 1 choice may be selected. 3.6 Approximate number of attendees / participants* Must be a number. 3.7 Applications which demonstrate evidence of partnerships or collaborations are highly desirable. If you are working with another organisation to deliver this event, outline who they are and their role in this event. Vou are required to provide evidence of partnerships or collaborations. PLEASE NOTE: Suppliers of goods/services are not considered partners/collaborators unless they are actively participating in the planning and delivery of the event. Upload letters confirming partnerships or collaborations Attach a file:	Alignment with our			
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Must be a number. 3.7 Applications which demonstrate evidence of partnerships or collaborations are highly desirable. If you are working with another organisation to deliver this event, outline who they are and their role in this event. * You are required to provide evidence of partnerships or collaborations. PLEASE NOTE: Suppliers of goods/services are not considered partners/collaborators unless they are actively participating in the planning and delivery of the event. Upload letters confirming partnerships or collaborations			other datasets.	
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goods/services are not considered partners/collaborators unless they are actively participating in the planning and delivery of the event. Upload letters confirming partnerships or collaborations	event, outline who t	hey are and their rol	le in this event. *	
	goods/services are not co	nsidered partners/collabo		
		rming partnerships o	or collaborations	
3.8 How will this event continue without future Ipswich City Council funding? * 3.9 Where will the event take place? *			future Ipswich City (Council funding? *

Address		
Address Line 1, Suburb/Town, Sta	te/Province, and	Postcode are required.
3.10 Which Council Division	n will the ever	nt be held in? *
O Division 1		O Division 3
O Division 2		O Division 4
Not sure which division the	event will be	held in?
Find out on the <u>Electoral Com</u> the event address).	mission of Quee	ensland website (go to the webpage and type in
USE OF COUNCIL LAND OR	FACILITY	
	r information, ir	, reserve or facility you will need to apply for accluding the link to <u>Park Search</u> for the online <u>se Information</u> page.
3.11 Is your event being he	eld in a Counc	il park or facility? *
○ Yes		O Yes - we are a sporting club in a Council
○ No		owned sport and recreation facility
3.12 Event Dates and Time	ıc.	
		acon approved
Events must not start until aft	_	• •
date.	ent must be held	d within 12 months of the funding approval
The funding approval date wil application closure date.	generally occu	r within six (6) weeks of the funding
Event Start Date *		Event End Date *
Must be a date.		Must be a date.
If your event is being held over methis is the first day of your event.		, If successful, an Acquittal will be due one month after this date (but no later than 12 months from
		the funding approval date). If your event is being
Event Start Time *		held over more than one day, this is the last day of your event.
		, , , , , , , , , , , , , , , , , , , ,
What times is your event schedul	ea to start?	Event Finish Time *
		What time is your event scheduled to finish?

Event Details Continued

* indicates a required field

Permits and Licences

Some events, even those held on your own or private property, may also require an additional permit or licence, e.g a Temporary Entertainment Event Licence (or TEEL) may be required for events attracting 500 people or more. Please refer to the <u>Permit and Licence Information</u> page for requirements or contact the ICC Applications Team on (07) 3810 6666 for further assistance.

Please attach the Park Booking Permit of facilities * Attach a file:	or proof of use of Council's park or
This may be your Temporary Entertainment Event Community Funding and Support Team on 3810 6	Licence Application Number. If unsure, contact the 648.
Do you have a current agreement / perm recreation facility? * O Yes	nission to use the Council owned sport and
	uncil owned sport and recreation facility does contact Council 3810 6666 or email the Sport wich.qld.gov.au.
Risk Management Plan	
Do you have a Risk Management Plan fo ○ Yes	r your event? * O No
PLEASE NOTE: You are not required to p Form, however, you will need to provide Temporary Entertainment Event Licence	one if you are required to apply for a
Please refer to the following links for information	tion which will assist your organisation to

Budget

* indicates a required field

If your organisation is registered for GST, all figures entered **MUST be GST EXCLUSIVE** (if successful, GST will be added to the amount funded).

If your organisation is NOT registered for GST, all figures entered **MUST include GST** (where applicable).

develop a risk management plan, including pre-populated checklists.

Volunteer Now - Risk Management Templates

Our Community - Event Risk Management Template

Click <u>here</u> for an online GST calculator to assist with your budget.

Applicant Contribution must be at least 20%:

Applicants are required to contribute to the cost of their event. Funds and/or support from other sources are required for Community Events Funding, with a minimum applicant contribution requirement of 20%, and could include:

- Cash / In-kind contribution from your organisation, e.g., staff costs, direct payment of goods/services, printing costs, administration support
- Voluntary contributions (ICC recognises the contribution of volunteers at \$40.35 per hour. This amount can be claimed as your organisation's in-kind contribution to the project costs)
- Other Guaranteed Income this may be from other grants/sponsorship received, etc.

For Expenditure:

- Please complete your full event budget in the table below not just the grant portion.
- Attach current quotes for each item Council funding will be used towards. Wherever possible goods and services should be purchased / hired from Ipswich based providers.
- ATTACH CURRENT QUOTES ONLY **DO NOT ATTACH INVOICES**. Please attach files below.

Note: Ipswich City Council provides In-Kind Assistance to eligible organisations to support the delivery of community and sporting events within the City of Ipswich. In-Kind Assistance includes the provision of refuse bins and portable toilets. Please see <u>In-Kind Assistance</u> to find the other ways Council can help.

4.1 Income Table

If you require assistance with completing the budget tables, please refer to the <u>Sample Budget Fact Sheet</u> or contact the Community Funding and Support Team at <u>communityfunding@ipswich.qld.gov.au</u>.

Income Description	\$ Funds coming in
Council's Community Events Funding (amount requested)	
Applicant organisation financial contribution (if applicable)	
Applicant Organisation in-kind contribution (if applicable)	
Other Guaranteed Income (if applicable)	
Partnering organisation's financial contribution (if applicable)	

4.2 Expenditure Table

If you require assistance with completing the budget tables, please refer to the Sample Budget Fact Sheet or contact the Community Funding and Support Team at communityfunding@ipswich.qld.gov.au.

expenditure Description or services)	(list goods and/ \$	Cost of go	oods / services	
	+			
4.3 Budget Totals				
The budget totals are autor total expenditure should be		from the tak	oles above. Total income	and
Please contact the Communicommunityfunding@ipswicl				ıdget.
Total Amount Requested (up to a maxim of \$5,000) *	um Total Income Amount		Total Expenditure Amount	
	This number/amou	int is	This number/amount is calculated.	
	calculated.		calculated.	
4.4 Please attach CURREN used towards.DO NOT ATTACH INVOICE Attach a file:		or all expend	liture items Council fund	s will be
Applications must include copi funding will be used towards. \ Ipswich based providers.				
4.5 Are the goods and/or purchased / hired from I O Yes - for all goods/service O Yes - for some goods/service Wherever possible goods and may find an Ipswich based pro	pswich based provings tes Crvices services should be pure	viders? *) No chased / hire	d from Ipswich based provic	
If not purchasing / hiring please explain why (eg.				ers,

5. Event Evaluation and Council Acknowledgement

* indicates a required field

Event Evaluation

At the end of your event, you must acquit the funding (proving you have spent the money in accordance with this application and provide copies of invoices and receipts). The acquittal also requires you to evaluate the project and provide information about the outcomes achieved.

For more information about evaluating projects, please refer to <u>Measuring What Matters</u> Booklet.

Measuring the success of an event could include:

- the number of people attending and/or participating in the event
- providing images, photographs and/or videos of the event
- surveying participants or target groups to gain feedback (this could be an online survey or hard copy surveys)
- undertaking attendee / participant or target group interviews

5.1 Metric	Target	Collection method	Explanatory notes
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. This question is read only.	Identify a target for the metric you have chosen - an estimated total for your project. This question is read only.	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. This question is read only.	Add notes if you need to provide more context. This question is read only.

5.2 Are there any other metrics that you would like to include to measure the success of your event? *

Council Acknowledgement

If your funding application is successful, you will be required to acknowledge the financial support provided by Ipswich City Council.

Ways of acknowledging funding should include:

• Inclusion of Council's Logo on all promotional and publicity activity, material and publications directly relating to the event

- Council's support acknowledged in any media statements, speeches, newsletters, annual reports, and correspondence to supporters and members relating directly to the event
- The Mayor and relevant Divisional Councillors are invited to attend and participate in the event and in any media releases and media opportunities directly related to the event
- Council's support acknowledged in multimedia material associated with the event such as website and social media

Further information on ways to acknowledge Council can be found on the <u>Acknowledgment</u> of <u>Council Funding</u> factsheet.

5.3 How will Council be acknowledged? *	
NOTE: You will be required to provide evidence of how you acknowledged (Council and the funding
of your event (eg. copies of advertising material / newsletter / annual repor	t, link or image of social
media post, etc.)	

6. Certification

* indicates a required field

6.1 Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (e.g. CEO, President, Chairperson, Treasurer, Secretary). If the application is not being submitted from the email address of the certifying individual, a letter on the organisation's letterhead confirming their support for the application must be attached.

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 organisation is approved for this funding, we will be required to accept the terms and conditions of the funding as outlined in the Funding Agreement.

ı agree *	O Yes				
Name of Authorised Person *	Title	First Name	Last Name		
Position *					
Contact Phone Number *					
	Must be an Australian phone number.				
Contact Email *					
	Must be a	ın email address.			

Date *	
	Must be a date.
Letter of certification (if	Attach a file:
relevant)	

6.2 Privacy Statement

Ipswich City Council is collecting your personal information so that we can process your request for the Community Events Funding Program. We will not disclose your personal information outside of Council unless we are required by law or you have given your consent. However, in order to perform the above functions, we may need to disclose your personal information to relevant Council Committees, which may be recorded in meeting agendas and formal minutes, which are accessible to the public. Further, your personal information, such as your name, may be discussed at the meetings of Council and its committees which are open to the public. Please also note that, as per the Community Funding and Support Policy, applicants are required to give permission for Council to publish the name of the recipient and the funding amount in accordance with Council's requirements under the Local Government Act 2009 and the Local Government Regulation 2012. By completing and signing this form and returning it to Council, we will consider that you have given us your consent to manage your personal information in the manner described in Council's Privacy Statement, Personal Information Digest and this collection notice.

7. Checklist and Feedback

* indicates a required field

Have you attached copies of all documents as required to support your application? Incomplete applications will not be considered.

Latest Financial Statement and/or latest Annual Report Current Public Liability Insurance Certificate or Certificate of Currency Current QUOTES ONLY for goods and/or services Council funds will be used towards
ecklist - these documents my be required (please attach if applicable) Applicant organisation's constitution (if applicant organisation is unincorporated) Letters confirming partnerships or collaborations Park Booking Permit or proof of use of Council's park or facilities
hese documents are required and not attached, your application may not be considered.

7.2 Applicant Feedback

Council invites feedback from applicants to help us to improve future community funding programs and processes. Before you review your application and click the **SUBMIT** button, please take a few moments to provide some feedback.

Out of 5, how would you rate the complexity of this application form.

1 = Very Difficult, 5 = Very Easy							
\bigcirc 1	○ 2	○ 3	O 4	O 5			

Would you like to provide feedback about the application process, (including guidelines, timeframes, resources etc) to assist us to improve the application process and to inform future funding and support programs?

We thank you for your feedback.