Community Projects Funding Program Application

* indicates a required field

Before you continue:

You will need to fully understand the guidelines for the Community Projects 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 Support Program Guidelines</u> before commencing your application. You may also like to look at the resources <u>'Grant Writing Tips'</u> and <u>'Sample Budget Fact Sheet'</u> available on Council's Funding and Support webpage.

Is the applicant a Not-for-Profit organisa (includes Churches and School P&Cs) *	
○ Yes	○ No
Is your application for an event (eg. fest Carols, etc.) * ○ Yes	ival, family fun day, fete, Christmas
Event Funding	

As you answered Yes - your application is for an event, you will need to apply through Community Events Funding.

Community Events Funding rounds are monthly with applications opening at midnight (start of day) on the first day of the month and closing at midnight (end of day) on the last day of the month.

You can find the current round's application form at SmartyGrants - Home Page.

For further information, including the Guidelines, please see the <u>Community Funding</u> and <u>Support webpage</u> or contact the Community Funding and Support Team at <u>communityfunding@ipswich.gld.gov.au</u> or phone (07) 3810 6648.

As you answered No - your organisation is INELIGIBLE for funding.

Please contact the Community Funding and Support Team at communityfunding@ipswich.qld.gov.au or phone (07) 3810 6648 to discuss further.

Name of Organisation *

Organisa	ation Name			
name tha		ocumentation such		e you provide the same siness Register, Australian
1. Con	tact Details			
1.1 Con Title	tact person for t First Name	he funding appl Last Name	ication *	
This is the	e person we will corre	espond with about t	his grant application.	
1.2 Posi	ition held in orga	nisation *		
e.g. Mana	iger, Board Member,	Coordinator, etc.		
1.3 Con	tact Phone Numl	oer *		
Must be a	n Australian phone r	number.		
1.4 Con	tact Email addre	SS *		
	in email address. e address we will use	to correspond with	you about this grant appl	ication.
2. Orga	anisation Deta	ils		
2.1 Org a	anisation's Stree	t Address *		
Address L	ine 1, Suburb/Town,	State/Province, and	l Postcode are required.	
2.2 Divi	sion where your	organisation is	located. *	
DivisiDivisi	on 1	Division 3Division 4		tside of Ipswich LGA
Not sur	e who your local	councillors are,	or which division yo	u're in?
	on the <u>Electoral Co</u>		_	the webpage and type in
2.3 Orga Address	anisation's Posta	al Address *		

Address Line 1, Suburb/Town, State/Province, and Postcode are required. 2.4 Organisation's Email address * Must be an email address. 2.5 Organisation's Website * Must be a URL. 2.6 Organisation's Bank Account * Account Name **BSB Number Account Number** Must be a valid Australian bank account format. 2.7 Latest Financial Statement and/or latest Annual Report * Attach a file: Applicant 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. 2.9 If your organisation is not incorporated, please attach a copy of your organisation's constitution Attach a file:

Certificate of Currency *	nt Public Liability Insurance Certificate or
Attach a file:	
The minimum cover required is \$20 million and th Australia. The certificate must be in the name of t	e insurance company must be licensed to operate in he applicant.
2.11 Please outline the management str your organisation's ability/capacity to m	ructure of your organisation and describe nanage community projects *
For example, please outline the management stru organisation's ability/capacity to manage commun	
2.12 Does your organisation adhere to s practices? *	ound Workplace Health & Safety
○ Yes	○ No
2.13 Does your organisation comply with Legislation including accounting and audiaws, privacy, confidentiality and freedo accredication of professional employees annual reports? *	diting requirements, antidiscrimination of information laws, registration and
○ Yes	○ No
2.14 Are any of your organisation's Boar Ipswich City Council staff? * O Yes	rd / Management Committee members
Council collects this information in accordance wit	h its Related Party Disclosure Policy
List all Board / Management Committee mem	bers who are Ipswich City Council staff:
Name	Position in your organisation (eg. Secretary, Committee Member, etc)
3. Project Details	
* indicates a required field	
3.1 Project Title *	
Provide the title for your event. Your title should b	e short but descriptive.
Is your project a facility upgrade? * ○ Yes	○ No

Is your project the purchase of equipment? * \bigcirc Yes \bigcirc No

TELL US ABOUT YOUR PROJECT

- What will you do and what activities are involved?
- Who will be involved?
- Why is this project needed?
- How will you deliver the outcomes?

3.2 Please provide information about your project (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.

What are the primary areas of focus for this project/program? *

No more than 3 choices may be selected.

You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

Who are the primary beneficiaries of this 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

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> <u>Ipswich Strategy</u>.

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).

3.3 Alignment with our outcomes	
Which of our outcomes will your project contribute to? If multiple apply pick the most relevant.	
No more than 1 choice may be selected.	

Our metrics

Attach a file:

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	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. No more than 1 choice may be selected.	Identify a target for the metric you have chosen - an estimated total for your project. Must be a number.	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.	

3.5 Approximate nur project *	mber of participants (or people who will be	nefit from the
Must be a number.			
are highly desirable.		ence of partnerships vith another organisa ble in this project. *	
	nsidered partners/collabor	os or collaborations. PLEAS rators unless they are acti	
Upload letters confir	ming partnerships o	r collaborations	

Page 6 of 15

3.7 How will this project continue withou	t future Ipswich City Council funding? *
3.8 Project Dates and Times	
Projects must not start until after funding has	been approved.
If funding is approved, the project must be coapproval date.	mpleted within 12 months of the funding
The funding approval date will generally occur application closure date.	r within six (6) weeks of the funding
Project Start Date *	Project End Date *
Must be a date. If your project is being held over more than one	Must be a date. If successful, an Acquittal will be due one month
day, this is the first day of your project.	after this date (but no later than 12 months from the funding approval date). If your project is being held over more than one day, this is the last day of
	your project.
3.9 Where will the project take place? *	
Address	
If purchasing equipment, where will the equipment conducted within the Ipswich LGA to be eligible for	
3.10 Which Council Division will the proje	
Division 1Division 2	Division 3Division 4
Not access which distant the country of well to	a hald too
Not sure which division the project will b	
the event address).	nsland website (go to the webpage and type in
USE OF COUNCIL LAND OR FACILITY	
If you are planning a project in a Council park, a permit or licence. For further information, in application, please visit the Permit and Licence	cluding the link to Park Search for the online
3.11 Is your project being held in a Counc	cil park or facility? * O Yes - we are a sporting club in a Council
	owned sport and recreation facility
○ No	

Risk Management Plan	
3.12 Do you have a Risk Management Plan for your project? * ○ Yes ○ No	
PLEASE NOTE: You are not required to provide a copy of your Risk Management Form on this application, however you may need to provide one if you are required to apply for any type of Permit or Licence for your project.	nt
Please refer to the following links for information which will assist your organisation to develop a risk management plan, including pre-populated checklists.	
Volunteer Now - Risk Management Templates	
Our Community - Risk Management Help for Not for-Profits	
Project Details Continued	
* indicates a required field	
Permit or Licence	
If your project is in a Council owned facility, park, or reserve you will need to book the facility or apply for a permit or licence. Please contact Council on 3810 6666 for further assistance.	
Please attach the booking confirmation or permit (proof of use) for Council's facility, park or reserve * Attach a file:	
Do you have a current agreement / permission to use the Council owned sport recreation facility? *	anc
○ Yes ○ No	
If your agreement / permission to use the Council owned sport and recreation facility do not cover your project or is not current, please contact Council 3810 6666 or email the sand Recreation Team at sportrecreation@ipswich.qld.gov.au .	
Facility Upgrade	
 Who owns the facility that is being upgraded? * Ipswich City Council facility - approval documentation required State Government facility - approval documentation required Federal Government facility - approval documentation required Privately Owned facility - approval documentation required Your organisation's facility- approval documentation not required 	

Approval Documentation

If your organisation is not the owner of the facility that is being upgraded, you must provide documentation from the owner showing their support for the project and evidence of your current tenure.

If you are a sporting club with a lease / seasonal permit for a Council owned facility, please contact the Sport and Recreation team at sportrecreation@ipswich.qld.gov.au or phone 3810 6666 before submitting your application.

Attach proof of permission from the owner of the property and proof of current

tenure * Attach a file:
PLEASE NOTE: Approval from the owner of the property does not replace any Development Application that may need to be submitted and approved for the works to proceed.
Is your building covered by a heritage overlay? * No
 Yes - Please seek advice from Council's Planning and Regulatory Services Department or 3810 6666 prior to completing your application Not sure - Please seek advice from Council's Planning and Regulatory Services Department on 07 3810 6666 prior to completing your application
Property development may require an appropriate approval. Please contact Council's Planning and Regulatory Services Department on 3810 6666 for further information prior to submitting this application to confirm whether an approval is required.
Do the upgrades have the necessary approvals? * O Not relevant - no approvals are required O Yes - approvals are attached below
Attach approval: * Attach a file:
If approvals aren't required, please explain how you came to this decision. For example, you have contacted Council's Planning and Regulatory Services Department (noting the name of the Officer) and have been notified that approvals are not required. *
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).

Click here 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 project. Funds and/or support from other sources are required for Community Projects 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** project 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.

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.gld.gov.au</u>.

Income Description \$ Funds coming in

Council's Community Projects 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 <u>Sample Budget Fact Sheet</u> or contact the Community Funding and Support Team at <u>communityfunding@ipswich.qld.gov.au</u>.

Expenditure Description	(list goods and/	\$ Cost of goods	s / services	
or services)				
		,		
4.3 Budget Totals				
The budget totals are auto total expenditure should b		from the tables	above. Total income	and
Please contact the Commucommunityfunding@ipswic			e to complete the bu	ıdget.
Total Amount Requested (up to a maximum state) *	num Total Income Amount	To	tal Expenditure Amount	
	This number/amo	ount is T	nis number/amount is	
	calculated.		alculated.	
4.4 Please attach CURREN used towards.DO NOT ATTACH INVOICAttach a file:		for all expenditur	e items Council fund	s will be
Applications must include cop	pios of current quotos	rocaived for the go	ads and/or convices Co	uncille
funding will be used towards. Ipswich based providers.				
4.5 Are the goods and/opurchased / hired from O Yes - for all goods/service O Yes - for some goods/service Wherever possible goods and may find an Ipswich based pro-	Ipswich based proces ervices services should be pu	oviders? * O No urchased / hired from	m Ipswich based provid	
If not purchasing / hirin please explain why (eg.				ers,

5. Project Evaluation and Council Acknowledgement

^{*} indicates a required field

Event Evaluation

At the end of your project, 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 a project could include:

- the number of people attending and/or participating in the project
- providing images, photographs and/or videos of the project
- 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 project? *

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 project
- Council's support acknowledged in any media statements, speeches, newsletters, annual reports, and correspondence to supporters and members relating directly to the project
- The Mayor and relevant Divisional Councillors are invited to attend and participate in the project and in any media releases and media opportunities directly related to the project

• Council's support acknowledged in multimedia material associated with the project such as website and social media

Further information on ways to acknowledge Council can be found on the <u>Acknowledgment</u> of Council Funding 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 project (eg. copies of advertising material / newsletter / annual report, 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 *	() Yes			
Name of Authorised Person *	Title	First Name	Last Name	
Position *				
Contact Phone Number *	Must be a	n Australian phone n	umber	
Contact Email *	Must be al	n Australian phone n	umber.	
	Must be a	n email address.		
Date *				
	Must be a	date.		
Letter of certification (if relevant)	Attach a	file:		

6.2 Privacy Statement

Ipswich City Council is collecting your personal information so that we can process your request for the Community Projects 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.

. Checklist - these documents are required * 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
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 Facility Owner's Permission for facility upgrades Any required permit/s or licence/s for facility upgrades less 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.

Page 14 of 15

Out of 5, how would you rate the complexity of this application form.							
1 = Very Difficu ○ 1	It, 5 = Very Easy ○ 2	O 3	O 4	O 5			

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

We thank you for your feedback.