1. Applicant Details

* indicates a required field

Before you continue:

You will need to fully understand the guidelines for the Enviroplan Levy Community 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 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 resource <u>"Grant Writing Tips"</u> available on Council's Funding and Support webpage.

Eligibility

Only eligible applications will be accepted. Please identify the type of applicant and confirm application requirements below.

| applicat | ion). * | | | | | |
|---|--------------|---------|--|---------------|----------------|-------|
| ○ A not for profit community organisation / | | | A regis | tered childca | are centre | |
| group | | | | | | |
| | | | egistered school chosen in order fo | | | |
| One or the | statements n | iust be | e chosen in order i | инѕ арриса | tion to be eng | lible |
| | | | | | | |
| 1.2 Appl | icant * | | | | | |
| ○ Individ | ual | O Org | ganisation | | | |
| Organisat | tion Name | | | | | |
| | | | | | | |
| Title | First Name | | Last Name | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Person * | | | | | |
| Title | First Name | | Last Name | | | |
| | | | | | | |
| | | | | | | |
| Position | Held in Org | anisa | ation: * | | | |
| | | , | · - | | | |

1.1 The applicant is: (tick the eligibility statement that applies to this

Are any of your organisation's Board / Management Committee members Ipswich City Council staff? *

| O Yes Council collects this information in ac | ○ No ccordance with its Related Party Disclosure Policy |
|---|---|
| List of Board / Management Comr | mittee members who are Inswich City Council staff |
| - | mittee members who are Ipswich City Council staff |
| Name | Position on your organisation's Board/Managament Committee (e.g. Chairperson, Committee Member, etc.) |
| | Champerson, Committee Member, etc.) |
| | |
| | |
| 1.3 Street Address: * Address | |
| | |
| | |
| Click on Cannot Find My Address if yo | our address does not come up in the list. |
| 1.4 Division where your street | t address is located. * |
| 9 | Division 3 Outside of the Ipswich LGA Division 4 |
| O DIVISION 2 | DIVISION 4 |
| Not sure which division you're | e in? |
| Find out on the <u>Electoral Commiss</u> your address). | sion of Queensland website (go to the webpage and type in |
| your address). | |
| 1.5 Postal Address: * Address | |
| Address | |
| | |
| Click on Cannot Find My Address if yo | our address does not come up in the list. |
| | · |
| 1.6 Email Address: * | |
| Must be an email address. | |
| | respond with you about this grant application. |
| 1.7 Phone Number: * | |
| | |
| If not a mobile number, you must inc | lude the area code. |
| 1.8 Applicant's Bank Account | * |
| Account Name | |
| | |
| BSB Number Account Number | er |

| Must be a valid Australian bank ac | ccount format. d directly to this nominated bank account. |
|---|--|
| Approved fullus will be transferred | d directly to this norminated bank account. |
| | |
| 1.9 Applicant ABN * | |
| | |
| The ABN provided will be used check that you have entered th | to look up the following information. Click Lookup above to he ABN correctly |
| Information from the Australian B | <u> </u> |
| 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. | |
| | |
| If your organisation is unin- constitution | corporated, please attach a copy of your organisation's |
| Attach a file: | |
| | |
| | |
| | ır current Public Liability Insurance Certificate or |
| Certificate of Currency * Attach a file: | |
| recedent a me. | |
| | |
| | nagement structure of your organisation and describe |
| your organisation's ability/o | capacity to manage community projects * |
| | |
| | |
| | |
| | your Wildlife Carer Registration * |
| Attach a file: | |
| | |
| 1.10 Please outline the type | e of wildlife carer work vou undertake * |

| e.g. Rescue, rehabilitation and release |
|--|
| 1.11 Does the applicant adhere to sound Workplace Health & Safety practices? *○ Yes○ No |
| 1.12 Does the applicant comply with all other Australian and Queensland Legislation including accounting and auditing requirements, antidiscrimination laws, privacy, confidentiality and freedom of information laws, registration and accredication of professional employees, and preparation and dissemination of annual reports? * O Yes O No |
| 2. Project Scope |
| * indicates a required field |
| 2.1 Project Title * |
| Provide a title for your project / program / initiative. Your title should be short but descriptive. |
| 2.2 Does your project involve the purchase of tools and/or equipment? * ○ Yes ○ No |
| Tell us about your project.What will you do and what activities are involved?Who will be involved?Why are you doing this project? |
| 2.3 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/ help-sheets/ https://explore.fundingcentre.fundingcentre.fundingcentre.com.au/help-sheets/ |

Click on Cannot Find My Address if your address does not come up in the list. If purchasing equipment, this will be the storage address.

| 2.5 Which Council Division will the pro ○ Division 1 ○ Division 2 | ject be held in? * O Division 3 O Division 4 |
|--|--|
| Not sure which division the project wil | l be held in? |
| Find out on the <u>Electoral Commission of Qu</u> the project address). | eensland website (go to the webpage and type in |
| What are the primary areas of focus fo | or this project/program? |
| | all have equal value. Only select sub-categories if you nt to know about the field of work (e.g. arts, sport, fect (e.g. young people, refugees) |
| Who are the primary beneficiaries of t | his project/program? |
| No more than 5 choices may be selected. Please choose only the group/s that are at the v | ery core of this project/program |
| Number of participants (if applicable) | |
| Must be a number. | |
| PROJECT DATES | |
| funding round closure date.If funding is approved, the project mus approval date. | t be completed within 12 months of the funding are date will be 1 month after the Project End Date |
| 2.6 Project Start Date: * | |
| | |
| Must be a date. Projects are not able to commence before funding from the round closure date. | ng is approved, which would be no later than 6 weeks |
| 2.7 Project End Date (for funding): * | |
| | |
| Must be a date. Funding must be expended within 12 months from | om the funding approval date. |

2.8 For projects that involve planting of trees, etc. please attach a species list: Attach a file:

FREE PLANT PROGRAM

You may also be eligible to receive free plants through Council's Free Plant Program.

For more information, see <u>Council's Free Plant Program webpage</u> or complete and return to Council the Free Plant Program Application Form.

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

For more information, please see the Natural Environment Strategy.

2.9 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).

Alignment with our outcomes

| Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. Io more than 1 choice may be selected. | |
|---|--|
| to more than I choice may be selected. | |
| | |

2.10 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.

Please align your metric/s with your outcome/s as selected above.

| Metric | Target | Collection method | Explanatory notes |
|--------------------------|---------------------------|--------------------------|--------------------------|
| Which of our metrics | Identify a target for the | How will you collect and | Add notes if you need to |
| (if any) will you track? | metric you have chosen | verify the data? E.g. | provide more context. |
| You may be required to | | survey, interviews/case | |

| report on your progress. Add more rows if you want to list additional metrics. No more than 1 choice may be selected. | - an estimated total for your project. Must be a number. | studies, focus groups, administrative data (e.g. case management data), observation/estimation, government or public dataset (e.g. Census), other datasets. | |
|---|---|---|----------------------|
| | | | |
| | <u> </u> | 1 | |
| Please describe how the tools and/or equ | | y ongoing maintenan | ce requirements of |
| How will the tools are end of this project? | | tinue to be of commu | nity benefit at the |
| Supporting Evide | nce | | |
| Please attach any of the application (if ap Attach a file: | | ıments you would like | to add in support of |
| For eg. project plan, lette | rs from partnering organ | isations/groups, additional (| evidence documents |
| Project details c | ontinued | | |
| * indicates a required t | ïeld | | |
| State GovernmentFederal GovernmentPrivately Owned - a | il - approval document - approval documentat nt - approval document | ion required ation required n required | |
| Please attach evider Attach a file: | nce of the land owne | ers support: * | |

If you are holding an activity (such as tree planting, etc.) or event or program in a Council owned park or facility, please attach Council's approval, the Park Booking Permit or proof of use of Council's park or facilities.

| Please outline the project area (e.g. total area of planting, school grounds for composting, etc.): * |
|---|
| |
| Please attach a basic map of the project area: * Attach a file: |
| Please attach a 'Before' photo of the project site: * Attach a file: |
| Evidence of work undertaken is required for the funding acquittal and a before photo will contribute to showing the current need for the project. |
| Risk Management Plan |
| 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.

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

3. Budget Details

* indicates a required field

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

Available Funding:

- Groups/Organisation: up to a maximum of \$3,000.00
- Wildlife Carers: up to a maximum of \$1,500.00

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 Enviroplan Levy Community 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 contribution to the project costs)
- Other Guaranteed Income this may be from other grants/sponsorship received, etc.

For Expenditure

- Please list **all** costings for the project each supplier or item must be listed separately.
- Attach current quotes for each item Council funding will be used towards. Wherever possible goods and services should be purchased from Ipswich based providers.
- ATTACH CURRENT QUOTES ONLY **DO NOT ATTACH INVOICES**. Please attach files below.

3.1 Income Table

| Council's Enviroplan Levy Community Funding (amount requested) | \$ |
|--|----|
| Applicant organisation financial contribution (if applicable) | \$ |
| Applicant Organisation in-kind contribution (if applicable) | \$ |
| Other Guaranteed Income (if applicable) | \$ |
| | \$ |
| | \$ |
| _ | \$ |
| | \$ |

3.2 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> or on 3810 6648.

Expenditure Description (list goods and/ \$ Cost of goods / services or services)

| \$ |
|----|
| \$ |
| \$ |
| \$ |

| \$ |
|----|
| \$ |
| \$ |
| \$ |

3.3 Budget Totals

The budget totals are automatically calculated from the tables above. Total income and total expenditure should be the same.

Please contact the Community Funding Team if you require assistance to complete the budget at communityfunding@ipswich.qld.gov.au

| Total Amount Requested * | Total Income Amount | Total Expenditure Amount | | |
|--------------------------|-----------------------------------|-----------------------------------|--|--|
| \$ | \$ | \$ | | |
| | This number/amount is calculated. | This number/amount is calculated. | | |

3.4 Please attach **CURRENT QUOTES ONLY** for expenditure items Council funds will be used towards.

| DO NOT ATTACH II | NVOICES. * |
|-------------------------|------------|
| Attach a file: | |
| | |

Applications must include copies of current quotes received for the goods and/or services Council's funding will be used towards. Wherever possible goods and services should be purchased from Ipswich based providers.

| 3.5 Are goods and/or services being | purchased from Ipswich based providers? |
|--|---|
| Yes - for all goods/services | ○ No |

○ Yes - for some goods/services

Wherever possible goods and services should be purchased from Ipswich based providers. You may find an Ipswich based provider at https://www.shopipswich.com.au/.

If not purchasing goods and/or services from Ipswich based providers, please explain why (eg. not available from a local provider, etc.) \ast

4. Project Evaluation and Council Acknowledgement

* indicates a required field

4.1 Our metrics

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 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 native trees planted and survive
- number of wildlife protected
- area of habitat protected
- surveying attendees at environmental events to gain feedback (this could be an online survey or hard copy surveys)
- providing images, photographs and/or videos of your activities

| 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. |
| | | | |
| | | | |
| | | | |

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

If there are no other metrics, type Nil or N/A.

Council Acknowledgement

f 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 of Council Funding</u> factsheet.

PLEASE 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.) in the Acquittal Form.

| 4.2 | 2 How wi | II Council | be ackn | owledge | d? * | |
|-----|----------|------------|---------|---------|------|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |

5. Certification

* indicates a required field

5.1 Organisation 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.

| i agree * | () Yes | | |
|---------------------------------------|------------|----------------------|-----------|
| Name of Authorised | Title | First Name | Last Name |
| Person * | | | |
| Position * | | | |
| Contact Phone Number * | Must be ar | n Australian phone n | umber. |
| Contact Email * | | | |
| | Must be ar | n email address. | |
| Date: * | | | |
| | Must be a | date. | |
| Letter of certification (if relevant) | Attach a | ïle: | |
| | | | |

5.1 Wildlife Carer Certification

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if I am approved for this funding, I will be required to accept the terms and conditions of the funding as outlined in the Funding Agreement.

| l agree * | ○ Yes | | | |
|-----------|---------|------------|-----------|--|
| Name | Title | First Name | Last Name | |
| | | | | |
| Date * | | | | |
| Date | Must be | a date. | | |

5.2 Privacy Statement

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

6. 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.

| 6.1 | . Checklist - these documents are required * |
|-----|--|
| | Public Liability Insurance Certificate or Certificate of Currency |
| | Map of Project Area |
| | Before Photo of Project Site |
| | Current Quotes |
| 6.2 | Checklist - these documents may be required |
| | Applicant organisation's constitution (if applicant organisation is unincorporated) Evidence of Land Owners Support (if applicable) |
| | |

| ☐ Species List for planting of trees, etc (if applicable) If these documents are required and not attached, your application will not be considered. |
|---|
| Have you attached copies of all documents as required to support your application? Incomplete applications will not be considered. |
| 6.1 Checklist - these documents are required * □ Wildlife Carer Registration □ Current Quotes |
| 6.2 Checklist - these documents may be required ☐ Species List for planting of trees, etc (if applicable) If these documents are required and not attached, your application will not be considered. |
| 6.3 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 ○ 1 |
| 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.