# Form Preview

# Before starting your application

\* indicates a required field

# Applicants please note

Before starting this application, read the *Thriving Communities Community Grant - Guidelines* 

If you have any questions about your eligibility or about this application form, please contact the GWW grants and sponsorships team on 13 44 99 or email sponsorship@gww.com.au

## **Confirmation of Eligibility**

- I have read and understood the sponsorship guidelines
- the applicant organisation is an eligible organisation as listed in the guidelines.
- the project or activity is located in the GWW service area
- the project has not already been undertaken and is as described in this application
- the applicant organisation does not owe money to GWW as a result of previous funding, grants or other service charges

The above statements are true for the org	yanisation
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Yes

# Applicant details

Organisation name \*
Organisation Name

# Organisation 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 Busi	ness Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	

# Form Preview

Main business location
Must be an ABN.
Our organisation is not incorporated and requires an auspice
Organisation admin contact * Organisation Name
Organisation primary address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation phone number *
Must be an Australian phone number.
Organisation postal address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation email *
Must be an email address.
Organisation website
Must be a URL.
Auspice Information
Auspice organisation Organisation Name
Auspice ABN

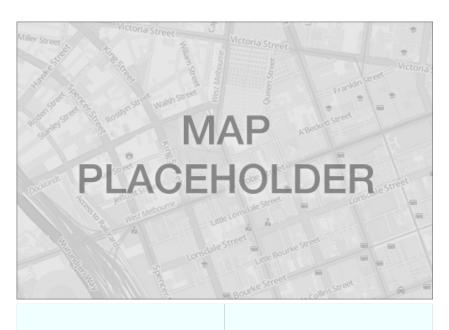
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

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	stralian Business Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (G	ST)
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	
Must be an ABN.	
Auspice project cont	a <b>ct</b> Last Name
This wante	Edst Nume
<b>Auspice primary add</b> Address	lress
Auspice primary em	ail
Must be an email address	<b>&gt;</b> .
Auspice primary wel	osite
Must be a URL.	
Must be a OKL.	
Auspice postal addre Address	ess
Project outline	
* indicates a required f	ïeld
Project or activity N	ame *
- I special additional file	

# 25-26 Community Grants Form Preview

Short project description *
Word count: Must be no more than 200 words. Provide a short description of your project - what are you out to do?
Start date *
Must be a date and between 1/7/2025 and 30/6/2026.
End date *
Must be a date and no earlier than 1/7/2025.
Expected number of participants
estimate only required
Total amount requested *  \$ Must be a dollar amount and no more than 20000. What is the total financial support you are requesting in this application?
Total project cost
\$ Must be a dollar amount. What is the total budgeted cost (dollars) of your project?
Project or activity location * Address



Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

# **GWW Local Government Area \***

- □ Brimbank
- ☐ Hobsons Bay
- □ Maribyrnong
- □ Melton
- ☐ Moonee Valley
- □ Wyndham
- □ Yarra
- ☐ Hume
- □ Macedon Ranges
- ☐ Melbourne
- ☐ Moorabool

# Project detail

\* indicates a required field

# Please note.

In answering the questions below, please remember we are specifically looking for projects that meet at least two of the following criteria:

- the project supports communities to thrive by **supporting development in our region**.
- the project demonstrates evidence of **community need.**
- the project is **locally-led** and supports GWW's diverse community groups to succeed.

You can refer back to the guidelines at anytime  $\underline{\text{here}}$ . Remember to save your form as you go.

Application tips and hints.

# Form Preview

For each question we have provided hints and tips that are designed to prompt you in answering the question. These are provided as a guide only and are not an exhaustive list.

### Question 1: Describe the project and how it supports development in the region?

In answering this question, you could consider

- what are the key outcomes of the project?
- what are the direct community links of the proposal?
- what benefits does the proposal have beyond project delivery?
- is there a strategy or policy that this project is aligned to or helps deliver?

*		
Word count		

### Word count:

Must be no more than 750 words.

# Question 2: What community benefits will your project deliver?

In answering this question, you could consider

- does the project have a clear outcome and community benefit?
- can your project demonstrate community support? (such as support letters, other project partners?)
- does the proposal respond to a recognised community need? (such as local research, previous projects, local policies)
- do you have evidence of community meeting, consultations?

*		
Mard count.		

### Word count:

Must be no more than 500 words.

### Question 3: What are the main activities planned as part of your project?

In answering this question, you could consider?

- do you have a timetable of events?
- is there community involvement included as part of the project?
- who is the main audience of the planned activities?
- do you have key milestones as part of the project plan?
- where will the activities take place

You are welcome to use bullet points to answer this question.

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*		
Word count:		
Must be no more than 200 words.		

# Question 4: Explain how your organisation will be able to deliver a successful project

In answering this question, you could consider

- has your organisation/ project lead previously completed a similiar project?
- what skills and knowledge does your group have to contribute to the project?
- are other project partners involved in the delivery?
- do you have a project / event plan? (you can attach an example in supporting documents)

*		
Word count:		

Must be no more than 150 words.

# Budget

In this section you have the option to use the budget table provided  $\mathbf{or}$  if you have a more detailed project budget, you can skip this section and add in a budget in the 'supporting documents' page

# Have you included a detailed budget in supporting documents?

O Yes

 $\bigcirc$  No

# **Budget**

Please outline your project budget and clearly outline the GWW contribution. Your budget should include any other project funding sources (cash and inkind) and if they are confirmed or unconfirmed.

Funding is exclusive of GST and amounts should reflect this.

Income	\$ Expenditure	\$
item description Must be at least 2 characters.	item description	
	\$	\$
	\$	\$
	\$	\$

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	\$		\$	
Budget Totals				
These amounts will aut	ofill from the information	on above		
Total Income Amount  \$ This number/amount is calculated.	Total Expenditure Amo \$ This number/amo calculated.	\$	Expenditure umber/amount is sted.	
Additional Funding	g (if applicable)			
Are any other fundin	g sources confirmed	? If not, how will th	is affect your project?	
This section allows you required. Examples of control of the section allows you required. Examples of control of the section o	to provide further infordocumentation you coulan  Idget  ns  nd use	ld provide include		
Upload supporting documents  Supporting documentation should directly reflect the project or organisation, such as support letters, quotes, project plans, reports etc				
Item		File Upload		

# Form Preview

# Certification and acknowledgement

\* indicates a required field

# Privacy

GWW is committed to protecting your privacy. The information collected in this form is for the purpose of assessing and managing the grants and sponsorships program.

Personal information will be shared with assessment panel members for the purpose of assessing your application.

By submitting an application you consent to GWW publishing successful applicants name, project name, description and funded amount on the GWW website. This information may be used to promote the GWW grants and sponsorship program more generally.

You can view GWW's Privacy Policy on our website.

I am authorised to complete this application \*

# Declaration

I acknowledge that to the best of my knowledge the information provided within this application and supporting documents are true and correct. I understand that if the applicant organisation is approved for funding, we will be required to accept funding terms and conditions as outlined in the funding agreement.

○ Yes			
Authorised person's			
First Name	Last Name		
Position			
Date *			
Must be a date.			
Your feedback			
Before you hit REVIEW	and SUBMIT, please to	ake the time to provide us with som	e feedback
How did you hear ab program?	oout the Thriving Co	mmunities grants and sponsors	hip

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How easy was it to fill out this application form?	
	Very easy
	Easy
	Okay
	Difficult
	Very difficult
Any comments or feedback about the form or process before you submit?	
	y comments of recubuck about the form of process before you submit