

# Community Grant - Online Application Form

## Form Preview

### Introduction

\* indicates a required field

The Community Grant program supports not-for-profit community groups and organisations with projects and initiatives that help local communities thrive by building community wellbeing, cohesion and capacity for PAE residents.

**Please read the [Community Grant Guidelines](#) carefully before applying.**

Please note:

- 1. Applicants must complete all sections of this application form and attach relevant documentation to this application to be eligible to be funded.**
- 2. All grants are subject to availability of funds, eligibility and assessment requirements.**
- 3. A submission of an online application for the City of Port Adelaide Enfield's grants programs is an acknowledgement that applicants will abide by the conditions of any grant approval.**
- 4. This is *not* a capital works or event grant program.**

### Who can I talk to?

PAE Grants Team

8405 6600

[grants@cityofpae.sa.gov.au](mailto:grants@cityofpae.sa.gov.au)

### Assessment

There are two funding rounds per year with opening and closing dates listed on the website. Applications will be assessed twice a year - normally in April and October.

Applications will be assessed by City of PAE staff against the criteria outlined in the [Community Grant Guidelines](#).

The decision of awarding grants will be made by City of PAE staff with appropriate delegations.

Applicants will be notified of the outcome of their application within six weeks of the round closing date.

### Eligibility Checklist

Before submitting your application, please check that you meet the eligibility criteria - all boxes must be ticked for your application to be eligible for funding.

\*

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- ☐ The applicant is a not-for-profit organisation, incorporated group, legal entity with comparable status, or a social enterprise.
- ☐ The proposed initiative is held within the City of PAE or provides benefits to PAE residents.
- ☐ The proposed initiative does not significantly duplicate existing Council services or those provided by other organisations.
- ☐ The applicant is not seeking funding for the delivery of programs or services which are intended to be ongoing. The exception to this is the development, pilot or trial of a program or initiative.
- ☐ The applicant is not applying for retrospective payments, fundraising activities, or budget deficit payments.
- ☐ The applicant is not applying to cover ongoing costs associated with the running of the organisation (eg. administration costs or overheads, salaries/wages, operational costs, utility bills, insurance, etc).
- ☐ The applicant does not have any outstanding debts (such as rates, fees, or charges) to the City of PAE.
- ☐ The applicant does not have any outstanding acquittals for any previous funding received from the City of PAE.

## Applicant Details

\* indicates a required field

### Applicant Information

#### Organisation / Community Group \*

Organisation Name

#### Contact Person \*

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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#### Position within the Organisation \*

#### Contact Phone Number \*

Where the number is not a mobile please put "08" at the beginning to help with validation.

#### Contact Email \*

#### Postal Address \*

Address

<input type="text"/>
<input type="text"/>

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### Organisation Website

### Does the applicant organisation have an Australian Business Number (ABN)? \*

- ☐ Yes  
☐ No

If you answer no to this question you must complete and attach a copy of a Statement by a Supplier form

### Is your organisation or group not-for-profit? \*

- ☐ Yes  
☐ No

Only not for profit organisations are eligible to apply for funding

### Please upload your most recent Audited Financial Statement \*

Attach a file:

Bank Statements will NOT be accepted. If your organisation or community group is not required to provide audited financial statements as part of your incorporation, please upload your financial statement completed by your treasurer. The treasurer's report is the one that is presented at your AGM. An annual general meeting (AGM) is a meeting of all the members of an incorporated association which must be held once during each calendar year. The annual general meeting must be convened in accordance with the law, using the procedures in the organisation's rules. The Associations Incorporation Act 1985. If you are a newly established incorporation, you will have 18 months to hold your first AGM. Please ensure to give the document a name so we know what it is.

## Applicant ABN

### 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

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### Statement by a Supplier form

[Statement by a Supplier form can be downloaded from the ATO website here](#)

**If applicant does not have an ABN please upload a completed Statement by a Supplier Form from the Australian Taxation Office (ATO) \***

Attach a file:

Please ensure to give the document a name so we know what it is.

### Proposed Initiative

\* indicates a required field

#### Overview

**Initiative Title \***

Word count:

Must be no more than 10 words.

This is the name of the project, initiative or activity.

**Briefly describe what you want to do \***

Word count:

Must be no more than 150 words.

Provide a short description of your project, initiative or activity.

#### Initiative Rationale

Provide clear evidence and/or reasons for why the initiative is important for the PAE community. Please note that this section carries an assessment weighting of 30%.

**Why does this initiative need to be done? \***

Word count:

Must be no more than 250 words.

#### Plan for delivery

Demonstrate your capacity to deliver the proposed initiative, with a clear plan - including participants, engagement, activities, resources, partners (if any), and sound evaluation. Please note that this section carries an assessment weighting of 20%.

**Who are the expected primary beneficiaries of this project/program? \***

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Who do you expect to benefit most from this initiative? (Primary Beneficiaries are your target audience or the group of individuals who will benefit the most) If your project is open to everyone, choose the first item, 'Universal - no particularly targeted beneficiaries'

### How will you let your target audience (primary beneficiaries) know about the initiative? \*

☐ Community Leaders ☐ Council ☐ Email distribution ☐ Flyers ☐ Letterbox drop  
☐ Network meetings ☐ Newsletters ☐ Posters ☐ Roadside banners ☐ Shopping Centres ☐ Social media  
Other

This is how you are going to engage your target audience into the initiative.

### When will the initiative start? \*

The initiative must start at least six weeks after the grant round closes.

### When do you expect to finish? \*

The initiative must be completed within a 12-month period.

### What are the planned activities? \*

Word count:

Must be no more than 200 words.

Briefly list the specific activities that will take place and where they will take place.

### Please upload any risk assessment you have completed \*

Attach a file:

This is only intended to be what your organisation would normally expect you to complete.

If you are unsure or do not have any templates available, a basic template for you to start from can be found at: [https://www.cityofpae.sa.gov.au/\\_\\_data/assets/word\\_doc/0040/1476787/PAE-Event-Risk-Assessment-Template.doc](https://www.cityofpae.sa.gov.au/__data/assets/word_doc/0040/1476787/PAE-Event-Risk-Assessment-Template.doc)

The City of Port Adelaide Enfield accepts no responsibility for the development of others Risk Management documents or procedures. Please ensure to give the document a name so we know what it is.

### Evaluation of Initiative \*

Word count:

Must be no more than 150 words.

What is your evaluation plan? Your evaluation plan should describe how you will know if you achieved what you set out to do, what you learnt and what would you change for next time.

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### What will you use to collect the above information? \*

Word count:

Must be no more than 100 words.

Please make sure you explain what you will use to collect the information you need i.e. surveys

### Community Wellbeing

Clearly identify the extent to which the initiative will build wellbeing, cohesion or capacity within the PAE community. Please note that this section carries an assessment weighting of 30%.

### What are the expected community wellbeing, cohesion or capacity outcomes of the initiative? \*

Word count:

Must be no more than 250 words.

### What happens to the project / initiative / activity at the end of the grant period and how will any benefits to the PAE community be extended or maintained? \*

Word count:

Must be no more than 150 words.

## Let's talk dollars

\* indicates a required field

Demonstrate reasonable and proportional applicant and/or partner contribution (can be in-kind, material or financial). Please note that this section carries an assessment weighting of 20%.

Please provide a list of the key proposed expenses (with GST included) in Table 1.

Please provide a list of income sources to pay for your proposed expenses in Table 2. It is important that you include other sources of contribution, which can be anything that does not necessarily require the exchange of money but may have financial value associated to it (ie. in-kind contribution for volunteer hours).

The total expenses and the total income should be equal. Please do not show a profit or a loss.

**Table 1 - Expenses - what are your expenses? \$**

	\$
	\$
	\$
	\$

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Itemise your expenses (ie. facilitators fees, marketing, venue hire, catering, etc.) and provide a dollar value for each item.

### Table 2 - Income Sources - how are you paying for your expenses? \$

	\$
	\$
	\$
	\$
Options include PAE grant, applicant's financial contribution, applicant's in-kind contribution, collaborator's contribution, and/or additional grants, etc.	

## Budget Totals

### Total Expenses

\$

This number/amount is calculated.

### Total Income

\$

This number/amount is calculated.

### Difference between Income and Expenses

\$

This number/amount is calculated.

This number should be \$0 (meaning there is no profit or loss). If not, please review your expenses and income sources so that the budget is balanced and does not show a profit or a loss.

### Total amount requested from Council \*

\$

What is the total financial support you are requesting in this application? You can apply for up to \$7,500.

### Please upload any quotes for purchases over \$500

Attach a file:

Please ensure to give the document a name so we know what it is.

## Bank details

Council's payment method is only by Electronic Funds Transfer (EFT). **Council will not provide cheques.** Grant funds will be automatically deposited into the following nominated account and must be in the name of the person/organisation completing the Terms and Conditions section of this application form.

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### Bank or Credit Union Name \*

### Account details \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

## Terms and Conditions

\* indicates a required field

I, being the authorised officer of the organisation making this declaration, confirm and agree to the following:

1. That failure to comply with these conditions may preclude our organisation from accessing further grant funds in the future.
2. To abide by the conditions under which the City of Port Adelaide Enfield may approve funding of this request.
3. To submit an evaluation report and acquittal to Council, no more than **two months** after the project is completed.
4. I certify that the statements and information provided (including attachments) in this application are true and correct in every particular.
5. I confirm that I have read and understood the [Community Grants Guidelines](#) and agree to abide by any Terms and conditions as outlined therein.
6. I agree to acknowledge Council's funding of the initiative in any publicity or promotion.
7. I agree that monies received from the City of Port Adelaide Enfield will be expended within 12 months as outlined in this application and in accordance with Council's approval letter. Any monies not expended will be returned to the City of Port Adelaide Enfield.
8. I agree that should my application for funding be approved, Council may provide any information contained herein to the public in any form and/or use this information to promote their grant and sponsorship programs.
9. Any changes to the agreed expenditure of Council's grant funds must be negotiated in writing with Council's Funding & Partnerships Officer.

### On behalf of the applicant organisation I agree to accept the above terms and conditions \*

☐ Yes, I agree

A submission of an online application for the City of Port Adelaide Enfield's grants programs is an acknowledgement that applicants will abide by the conditions of any grant approval.

In compliance with the *Information Privacy Act 2009* (the Act) personal information on this form may be stored in the City of Port Adelaide Enfield's records database and may also be used for statistical research, information provision and evaluation of services. Your personal information may be provided to the financial institution which handles City of Port Adelaide Enfield's financial transactions and may be disclosed to other agencies and third parties for



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purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.