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|  | | | | | *Office Use Only* | | **A/CGF1** | |
| *Submission:* | | **I** | |
| *Acknowledged:* | | **O** | |
| *Funding to date / notes:* | |  | |
| **Community Assistance Grants and Sponsorship Program**  **Funding Application Form 2021-2022** | | | | | | | | |
| Applications must be received no later than **4pm Monday 24 May 2021.** | | | | | | | | |
| **Prior to commencing this application** | | | | | | | | |
| Please read the *Grant and Sponsorship Condition Guidelines,* and phone the Town’s Coordinator Community Engagement on 9339 9342 to discuss your proposal. A reference number will be supplied. | | | | | | **Reference Number**  **ICS** | | |
| **Section A: Applicant Details** | | | | | | | | |
| **Organisation** | |  | | | | | | |
| **Postal Address** | |  | | | | | | |
| **Is the organisation located within the Town of East Fremantle?** | | | | | | **Yes** | | **No** |
| Please provide a contact person who can help if further information is required. Under the Privacy Act (1988) you must get their consent before recording their details below. | | | | | | | | |
| **Contact Name** | |  | | | | | | |
| **Position** | |  | | | | | | |
| **Contact Phone** | |  | | | | | | |
| **Contact Email** | |  | | | | | | |
| Please provide the following financial details for your organisation. | | | | | | | | |
| **ABN #** | |  | | | | | | |
| **No ABN?** Complete and attach a Statement by Supplier,  *this form is available from* [*https://www.ato.gov.au/*](https://www.ato.gov.au/)*.* | | | | | | **No ABN, Statement attached** | | |
| **Is your organisation GST Registered?** | | | | | | **Yes** | | **No** |
| **Is your organisation incorporated?**  *Please attach a copy of your Certificate of Incorporation* | | | | | | **Yes** | | **No** |
| **Is your organisation Not-for-Profit?** | | | | | | **Yes** | | **No** |
| **Section B: Project / Event Summary** | | | | | | | | |
| **Project / Event Name** | | |  | | | | | |
| **Total Project Value**  *See budget, page 4* | | | $ | | | | | |
| **Funding Requested** | | | $ | | | | | |
| **Description** – *please briefly describe your project/event in up to 25 words.* | | |  | | | | | |
| **Section C: Funding Category** | | | | | | | | |
| Please advise which category of funding you are applying for: | | | | | | | | |
|  | **Community Assistance Grants** | | | | | | | |
| This funding is designed to provide benefits to Town residents through recreational, sporting, social or cultural means.  Grants can be used towards tangible/physical items such as infrastructure and equipment. Examples include uniforms, children’s play equipment, shade sails or structures etc. | | | | | | | | |
|  | **Event Sponsorship** | | | | | | | |
| The Town appreciates the importance of events in creating healthy communities.  Sponsorship is made available to be used towards the costs associated with running an event, such as catering, entertainment, equipment and venue hire for community events held within the Town. Please note that you will need to submit an “Event Notification” separately to this funding process and be mindful of our “Sustainable Events Policy” | | | | | | | | |
| **Section D: Project / Event Details** | | | | | | | | |
| To assist in the assessment of your application, please provide details of your project/event (you are welcome to attach additional pages and/or your Project/Event Plan). | | | | | | | | |
| **Project / Event Description** | | | | | | | | |
|  | | | | | | | | |
| Expected commencement date: | | | | Expected completion date: | | | | |

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| Does your project or event focus on a particular target group? | | | | | | **Yes** | | | **No** | |
| If “yes’, please advise: | | | | | | | | | | |
|  | Children (up to 12 years) | |  | Young People (12 to 25 years) | | | | | | |
|  | Over 55s | |  | People with Disabilities | | | | | | |
|  | Other (please specify) | | |  | | | | | | |
| Are you working with any other community groups or businesses in the delivery of this project? If yes, please provide details. | | | | | | | | | | |
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| Why should this project be a priority for the Town of East Fremantle? | | | | | | | | | | |
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| **Section E: Additional Funding Information** | | | | | | | | | | |
| The Town of East Fremantle encourages community groups to apply for funding from alternative sources either prior to or simultaneously to their application for Town funding. | | | | | | | | | | |
| Have you sought funding from any other organisations? | | | | | | | | **Yes** | | **No** |
| **Organisation(s)** | | | **Status** | | **Outcome** | | | | | |
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| If no, what are the reasons why your organisation has not sought alternative funding? | | | | | | | | | | |
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| **Section F: Project / Event Budget** | | | | | | | | | | |
| Please provide a detailed budget for the project or event for which you are requesting funds. All costs should be itemised in the space below. Quotes are required for costs over $500. Please note that your income and expenditure should match. | | | | | | | | | | |
| **Cash Expenditure Item** | | **Supplier** | | | | | **Cash Cost ($)** | | | |
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| **TOTAL CASH COST** | | | | | | | $ | | | |
| **Cash Income** | | **Funder** | | | | | **Cash Income ($)** | | | |
| This application | | Town of East Fremantle | | | | |  | | | |
| Your cash contribution | | Applicant | | | | |  | | | |
| Other cash contribution | |  | | | | |  | | | |
| Other cash contribution | |  | | | | |  | | | |
| Other cash contribution | |  | | | | |  | | | |
| **TOTAL CASH INCOME**  *should equal total cash cost* | | | | | | | $ | | | |
| **In Kind Item or Activity** | | **By Whom** | | | | | **In-Kind Value ($)** | | | |
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| **TOTAL IN-KIND VALUE** | | | | | | | $ | | | |
| **Project / Event Value**  *Total Cash Cost + Total In-Kind Value* | | | | | | | $ | | | |

Thank you for supporting your community, we wish you good luck with your application and proposed project/event, please don’t hesitate to call the Town’s Coordinator Community Engagement (9339 9342) if you have any queries or need assistance.