

Multi-year Community Impact Grants Application Form

ABOUT THE APPLICANT

Name of Organisation/ Community Group/ Business:

Description of your organisation:

Is your organisation a legal entity? *If not, the grant must be auspiced by a legal entity.*

Yes

No

Name of auspicing body (if applicable):

ABN (of applicant or auspicing body):

Is the applicant registered for GST? *(or the auspicing body?)*

Yes

No

Does the applicant have any outstanding legal or financial matters with Council?

Yes

No

If you have previously received a grant from this Council, have acquittals been submitted?

Yes

No

CONTACT DETAILS FOR THE PROJECT

Name of Initiative/ Project:

Contact Person:

Position:

Postal Address:

Phone:

Email:

Website:



ABOUT THE PROJECT

Project Name:

Please provide an outline of your proposed initiative/ project (*max 200 words*):

Please list the aims and objectives of your initiative (*max 100 words*):

How many participants do you expect to be involved in the initiative?:

What percentage of participants will be Unley residents?:

Total funding requested p.a. \$ (excl GST):

Have you applied for other external funding for this project?

Yes

No

If yes, please provide details:

ASSESSMENT CRITERIA Please refer to the Guidelines

How will your project benefit the community? Is there evidence that the project is important to our community? (*max 200 words*):



ASSESSMENT CRITERIA *Continued*

How will your project enhance and/or promote social inclusion? *(max 200 words):*

How will your project foster partnerships? *(max 200 words):*

How is your project innovative? *(max 200 words):*

Please detail your organisation's experience delivering community outcomes? *(max 200 words):*



ASSESSMENT CRITERIA *Continued*

Planning for Sustainability

Please provide a brief timeline of your proposal, including how you plan to promote, develop and evaluate the project and plan for sustainability over three years (subject to community engagement processes and lessons learnt along the way).
(max 200 words. This can be attached separately if easier).

BUDGETING

Please detail the available and required resources to deliver the project. *Quotes for equipment, facilities and/or services over \$500 must be attached to this application. Hourly rates for salaries for the project, tuition and instructor's fees, etc. should be indicated.*

| Activity | Amount sought from Council \$ | Organisation contribution \$ | Income from other sources \$ | Other \$ | Total cost \$ |
|-------------------|-------------------------------|------------------------------|------------------------------|----------|---------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Cost | | | | | |

In Kind Contribution

Please detail any in kind contributions which will contribute to delivering the project e.g. free venue space, donated materials, professional expertise, other costs being absorbed, volunteer hours (valued at \$ 45.10 per hour).

| | |
|-----------------------------------|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| Total In-kind Contribution | \$ |

Capacity to Deliver Project

Please detail the skills and techniques of the project team to meet the organisational or logistical challenges of the initiative, including how you will manage any risks. *(max 200 words):*



Do you have any further information about your project that you would like to give? (max 200 words):

Please attach supporting documentation such as quotes and concept drawings.

APPLICANT DECLARATION

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

1. The information given in this application, including any attachments hereto, is true and correct in every particular.
2. I am authorised by the applicant organisation to prepare and submit this application for financial assistance.
3. The funds will only be used for the approved project as outlined in this application.
4. The funds provided each year will be spent by the applicant organisation within 12 months of receiving the funds. OR The funds provided will be spent by the applicant organisation within three years of receiving the funds.
5. Any moneys not expended on completion of the project will be returned to the City of Unley.
6. I understand that should this application be approved by the City of Unley that I will be required to accept the Terms and Conditions of the Partnership Agreement.
7. We agree to adhere to Government restrictions and regulations in relation to COVID-19 and will prepare and submit a COVID Safe or COVID Management plan for SA Health if required.

| | |
|------------|-----------|
| Name: | Position: |
| Signature: | Date: |

If this application is being submitted under the auspice of another organisation please complete the following details:

| | |
|---------------------------------|----------------------------|
| Name of Auspicing Organisation: | Name of Delegated Officer: |
| Signature: | Date: |

Please forward your completed application to:

Multi-year Community Impact Grants Program

Attention Matthew Ives
Mail PO Box 1, Unley SA 5061
In person Civic Centre, 181 Unley Road Unley SA 5061
Email mives@unley.sa.gov.au

Where possible, electronic submission is preferred.

Contact

Matthew Ives

Cultural Development Coordinator
City of Unley
mives@unley.sa.gov.au
8372 5134
0417 087 142