GYMPIE REGIONAL COUNCIL COMMUNITY GRANTS PROGRAM 2023/2024

Through the Community Grants Program Council provides financial assistance to eligible community organisations and applicants to deliver projects which respond to community need, align with Council's Corporate Plan 2022 - 2027 and other relevant strategies and plans, and enhance the social, environmental, economic and/or cultural wellbeing of the Gympie region.

Information for applicants

Before completing this application:

1. Applicants are encouraged to speak with an officer from Council's Community Development Team

Please call 1300 307 800 or email *grantsadmin@gympie.qld.gov.au* to make an appointment.

- 2. Read the Community Grants Program Guidelines 2023/2024 available on <u>Council's Grants and Funding webpage.</u>
- 4. Applications will only be accepted by submission through the Smarty Grants portal.
- 5. Parts of this application will require supporting documentation. Please ensure that documentation is clear and legible.

NB: No late or incomplete applications will be accepted.

If you require further assistance with using Smarty Grants portal please click <u>here</u> to access the FAO's.

Privacy Notice

Gympie Regional Council collects information in accordance with our Information Privacy Policy, a copy is available from Council's website.

In providing any personal information, please note that you are agreeing to the possible transfer of your information outside Australia via the internet under s33 of the Information Privacy Act 2009. If for any reason you are unable to agree to these terms, please contact Council on 1300 307 800 to discuss alternate arrangements.

Grant Category: COUNCIL VENUE FEE WAIVER

For full details on Grant Categories read the Community Grants Program Guidelines 2023/2024 available on <u>Council's Grants and Funding webpage</u>.

Purpose:

Form Preview

To support community organisations to deliver community events and programs at Council controlled and managed venues (e.g. The Pavilion, Gympie Civic Centre, Kilkivan Equestrian Centre, Goomeri Hall of Memory, Kilkivan Public Hall).

Amount & co- contributions:

Maximum grant amount: \$2,500

Variable venue costs such as additional equipment, cleaning and technical support are not covered by the venue fee waiver. Four hours bump-in and four hours bump out can be included in the fee waiver grant, with additional bump in and out hours to be paid by the event organiser.

Priorities:

- 1.Provide community events and programs that foster inclusive and connected communities, nurture creativity, promote healthy living and/or enhance liveability;
- 2.Provide community events or programs that support industry development, tourism and/or economic resilience;
- 3.Provide community events or programs that promote the enhancement of the natural environment, biodiversity and/or sustainability.

Category Specific Eligibility

- Events must be open to the public (not exclusive to individual organisations or their members)
- Events can be ticketed or non-ticketed (free) events
- Events must be one-off, annual or special by nature (not regular or routinely delivered by the organisation).

Required support material

- Confirmation of venue booking and cost estimate from Council's Venues Team
- Additional documentation such as risk management, insurance, licences and approvals may need to be included as part of the venues booking process with Council.

Please note: This grant is only for the purpose of waiving venue hire fees and does not replace Council's booking and hire process.

APPLICANT DETAILS

* indicates a required field

Eligibility

This section of the application form is designed to help you, and us, understand if you are eligible for this grant.

It is crucial that you complete these questions before any others to ensure you are applying for the most suitable grant.

If you have any questions in regards to the eligibility criteria, please contact a member of the Community Development Team on 1300 307 800.

I confirm that my organisation...... *

 $\ \square$ is a not-for-profit community organisation

Form Preview

not-for-profit co-operatives and co-application □ holds \$20M public liability ins □ has no outstanding debt with □ has satisfied requirements of funding as per the Funding Agree □ is based in, or provides direct	n Council f any previous Gympie Regional Council Community Grant ement or any approved variation It benefits to, the Gympie region. Applicant as per the Community Grants Program Guidelines
Applicant Organisation de	etails
Organisation Name * Organisation Name	
As listed with the Office of Fair Tradii	ing or ASIC
Contact Person * Title First Name Last	: Name
Position within the organisat	:ion *
E.g President, Secretary, Treasurer, 0	Grants Officer
Organisation Address * Address	
Suburb State Postcode	
Must beAddress Line 1, Suburb/Towr	n, State/Province, and Postcode are required
Postal Address (if different fr Address	rom above) *
Suburb State Postcode Must beAddress Line 1, Suburb/Town	n, State/Province, and Postcode are required
Primary Phone Number *	
Must be an Australian phone number	er.

Alternate Phone Number
Must be an Australian phone number.
Contact person's email address *
Must be an email address.
Applicant organisation type
What is your organisation's legal structure? * O Incorporated association O Unincorporated association If your organisation is an unincorporated association you must be auspiced by an incorporated organisation.
Is your group being auspiced by another organisation for the purpose of this grant? *
○ Yes ○ No
Applicant organisation ABN
To use the online ABN search tool provided by the Australian Government through the Australian Business Register, click <u>HERE</u>
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)

Must be an ABN.

DGR Endorsed ATO Charity Type

ACNC Registration
Tax Concessions

Main business location

AUSPICE INFORMATION

More information

Is the auspice organisation incorporated and not for profit? *

* indicates a required field

 No If you have answered to this question you are ineligible to apply. If you would like further information please contact Council on 1300 307 800.
This section only needs to be completed if the applicant organisation is not incorporated. In which case the applicant organisation needs to be auspiced by an organisation which is.
The auspiced organisation will take full legal and financial responsibility for the delivery of this project, the grant administration and finalisation. For example if you are successful, the auspice organisation signs the Letter of Offer, and is paid the grant.
Auspice organisation name * Organisation Name
Auspice Primary Address * Address
Suburb State Postcode
Must beAddress Line 1, Suburb/Town, State/Province, and Postcode are required
Auspice Postal Address * Address
Suburb State Postcode
Must beAddress Line 1, Suburb/Town, State/Province, and Postcode are required
Primary contact person at auspicing organisation * Title First Name Last Name
Please attach a letter from the auspicing organisation confirming this arrangement is valid and current * Attach a file:
Letter must be signed by an appropriately authorised person (e.g President, Committee Member) and
must include, name, position, signature and date.

Position held within the organisation *
Primary phone number *
Must be an Australian phone number.
Alternate phone number
Must be an Australian phone number.
Contrat noncolo constitutado e
Contact person's email address *
Must be an email address.
Augnicing organisation wobsite
Auspicing organisation website
Must be a URL.

To use the online ABN search tool provided by the Australian Government through the Australian Business Register, click $\underline{\sf HERE}$

Auspice 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 Business Register		
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.		

EVENT DETAILS

* indicates a required field

Form Preview

Venue to be hired: *
Provide name of Council controlled and managed venue.
Event Title *
Provide a title for the event to be held at the above venue that is short but descriptive.
Event Description *
Word count: Must be no more than 100 words. Provide a brief description of the event. This may be used for promotional purposes.
Event Delivery Overview *
Word count: Must be no more than 300 words. Include information about how your project will be delivered, by whom and where. Describe what whappen.
Is your event open to the general public? * O Yes O No (Transport that are evaluative to individual experience as their members are inclinible, and quideline
(Events that are exclusive to individual organisations or their members are ineligible - see guideline
Project Start Date *
Must be a date. *Project cannot commence prior to notification of outcome (applicants are advised this could be up 6 weeks from application date)
Project End Date *
Must be a date. Must be no more than12 months from outcome date. If you are a successful applicant your acquitte will be due 4 weeks from project end date.
Applicants may be offered partial funding. In this case, can the project proceed
with partial grant funding? * O Yes O No Please note if you are awarded partial funding you may be asked to resubmit the project budget.

APPLICATION CRITERIA

* indicates a required field

This section demonstrates how the application will meet the assessment criteria as described in section 8 of the Community Grants Program Guidelines 2023/2024

Grant Category: COUNCIL VENUE FEE WAIVER

Purpose: To support community organisations to deliver community events and programs at Council controlled and managed venues (e.g. The Pavilion, Gympie Civic Centre, Kilkivan Equestrian Centre, Goomeri Hall of Memory, Kilkivan Public Hall).

Please select one or more priorities that are most relevant to your project: *
☐ 1. Provide community events and programs that foster inclusive and connected
communities, nurture creativity, promote healthy living and/or enhance liveability;
□ 2. Provide community events or programs that support industry development, tourism
and/or economic resilience;
□ 3. Provide community events or programs that promote the enhancement of the natura
environment, biodiversity and/or sustainability.
At least 1 choice must be selected.
Please select one or more, as relevant
Community benefit of the project: outline how the project meets the category

Community benefit of the project: outline now the project m	eets tne category
purpose and at least one of the category priorities *	

Word count:

Must be no more than 300 words.

Provide detail on the reasoning behind the project, and the issue or need that will be addressed by the project. Provide detail on the intended outcomes of the project, and how these benefit the region.

FEE WAIVER

* indicates a required field

GST

Please include GST on all items including the grant amount requested in this application.

Organisations that are GST registered must ensure that GST is included in the requested grant amount. **GST is not added to the total grant amount requested.**

Venue booking and cost estimate

Please note: This grant is only for the purpose of waiving venue hire fees and does not replace Council's booking and hire process.

Form Preview

Total venue hire amount (\$)	Grant amount requested (\$)	Venue booking/cost estimate/hire fee quote
The total amount quoted including variable costs.	Grant amount to cover this item. Maximum \$2,500. Must not include variable costs such as additional equipment, cleaning and technical support.	
\$	\$	
Grant request		
Total Expenditure Amount	\$ This number/amount is calcula	ated.
Total Grant Requested	\$ This number/amount is calcula Note: Min \$500 Max \$2,500	ated.
If required, how will the organisation's contribution to the project be funded? *	 □ Cash contribution □ Ticket sales □ Other grant or funding (confirmed or not confirmed) □ Sponsorship □ In Kind contribution of goods and/or services □ Other: 	

SUPPORTING DOCUMENTS

* indicates a required field

Ensure that any documentation can be easily read, and is not distorted or unclear.

Public Liability Insurance

A copy of the organisation's Certificate of Currency for Public Liability Insurance to the value of \$20M **must** be included. A tax invoice or receipt of payment of insurance will not be accepted.

Evidence of your organisation's Public Liability Insurance certificate of current (and/or auspice organisation if applicable) *		
Attach a file:		
A minimum of 1 file must be attached.		

Supporting documents

Providing supporting documents can strengthen the application and provide more information for assessment. Recommended supporting documents include:

• Draft event program

Attach supporting documents here

- Letter(s) of support for the project (maximum three)
- Letter(s) of confirmation from partners, stakeholders, sponsors and other organisations (referred to in this application)

Attach a file:
Files must be .pdf, Word, Excel, .jpg. More than 1 file can be uploaded.
CERTIFICATION AND FEEDBACK
* indicates a required field
Certification by authorised person
I certify that: * □ to the best of my knowledge the statements made in this application are true and correct □ I have read and accept the 'Community Grants Program Guidelines 2023/2024' □ I agree to complete a project acquittal within 4 weeks of the end of the project delivery timeframe for this round. □ our organisation has financial practices in place to adequately record the grant income and expenditure. The grant expenditure will be evidenced by attaching tax invoices to the acquittal □ I acknowledge that if any member of our organisation lobbies a Councillor or staff member in relation to this grant application, the application is disqualified This section must be completed by an authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).
Name of authorised person of applicant organisation * Title First Name Last Name
Position in the organisation *
Date *
Must be a date.

This section must be completed by an authorised person on behalf of the auspice organisation (may be different to the contact person listed earlier in this application form).

☐ I have Guideline ☐ I agre 4 weeks © ☐ our or and expeacquittal	e best of my know e read and accept es' ee to prepare and of the project deli- rganisation has fir	ed the 'Community complete the proje very timeframe for nancial practices in t expenditure will b	Development Grants ect outcome report and this round. place to adequately re	tion are true and correct Program 2023/24 I return to Council within ecord the grant income ing tax invoices to the
	_		auspiced organisati	on *
Title	First Name	Last Name		
Position	in organisation	*		
Date *				
Applica	nt Feedback			
Before yo provide fe		olication and make	a submission, please t	take a few moments to
	ou like to subsc grant opportur		Info Share newslette	ers to keep up to date
*If yes, s	subscribe to <u>Cou</u>	ıncil's Info Share	newsletter (sign up))
Please ii	ndicate how eas	y the online app	lication process was cult □ Very Difficult	
Do you h improve		stions on how the	e application proces	s/form could be
□ Inform	nation Flyer 🗆 C	Council's Communit	ty Grants Program? sy Info Share (eNews) Word of mouth	* □ Council's Facebook
Did you ○ Yes	attend a Gympi	e Regional Coun	cil Grants Informatio	n Session?

Did you find the information session helpful?		
○ Yes	○ No	
Do you have any other	comments you wish to make about th	e grants process?

Thank you for your feedback. Please ensure you review your application before you press submit.

After pressing **SUBMIT**, you will receive an email confirming your submission has been made.

If you require further support, please call the Community Development Team on 1300 307 800.