Eligibility

* indicates a required field

Applicants: please note

Before completing this application form, you should read the **2023-24 Banyule Community [grant guidelines](#).**

This section of the application form is designed to help you understand if you are eligible for this grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in relation to these eligibility criteria, please contact **Karen Molinaro on 9457 9955 or email karen.molinaro@banyule.vic.gov.au**

Confirmation of Eligibility

Is your group supported by state or federal funding ? *
○ Yes   ○ No
If your group receives an annual/regular payment from state or federal government for operational expenses you are not eligible for this grant. Do not proceed with the application.

I confirm that the applicant ...

- has read and understood the grant program guidelines
- is a not-for-profit group/club/organisation
- is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- is located in and/or provides services to residents of the City of Banyule.
- has been established and operational for a minimum of 12 months at the time of the application
- is able to demonstrate financial viability
- does not have any outstanding debt to Banyule City Council
- does not have any outstanding grant acquittals to Banyule City Council
- has the appropriate type and level of insurance for the activities that are the subject of this grant
- is not seeking funding for political or religious purposes
- is not seeking funding for the core business of educational or medical organisations
- is not seeking retrospective funding
- does not undertake or promote gambling unless there is a significant community benefit demonstrated

Please select below: *
○ Yes   ○ No
if you cannot confirm that all statements above are true and correct., please do not proceed with this application.

Contact with a Council officer

I have discussed the proposed project with *

Date of discussion *

Must be a date.

Applicant details

* indicates a required field

The **applicant** is the name of the group/club /organisation, not the name of the individual completing the application on behalf of the group/club/organisation.
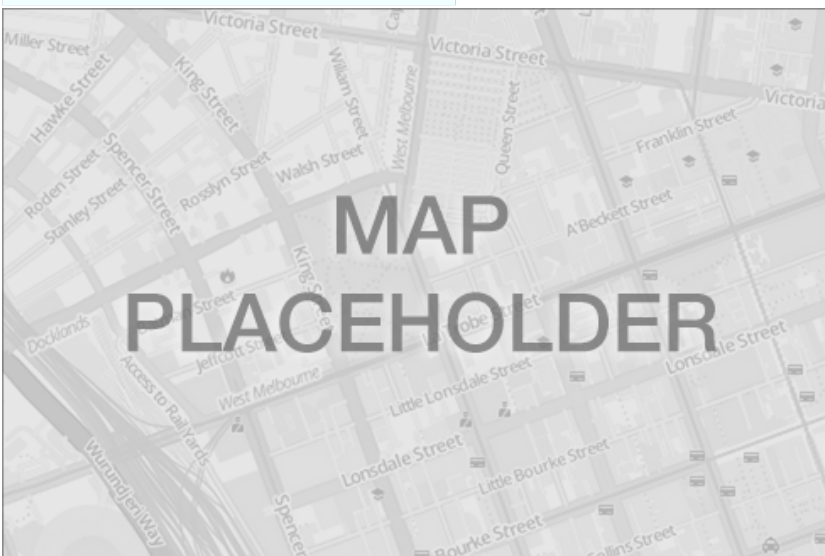
Applicant - name of group/organisation *

Please use your organisations full name. Check the spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO.

If the applicant is known by another name provide details here.

Applicant Primary address *
Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant Postal Address

Applicant phone number *

Must be an Australian phone number.

Website

Must be a URL.

Contact person for this application

If this application is been submitted by a professional grant writing company, **please ensure** you provide contact details for the not for profit group, not the grant writer.

Name *

Title	First Name	Last Name

This is the person we will correspond with about this grant

Position held *

Phone Number *

Must be an Australian phone number.

Email *

Must be an email address.
Where possible, this should be the email of the group, not a personal email address as we will use this email to correspond with the applicant for the life of the grant.

Applicants structure

* indicates a required field

What type of group are you? *

If incorporated, provide your Incorporation registration number here?

If incorporated, does the applicant have an ABN? *

○ Yes ○ No

If you do not have an ABN, you will be required to submit a completed ATO Statement by a Supplier Form if your application is successful. If this form is not submitted, Council is required to withhold 48.5% of any approved grant. Please refer to the ATO website for further details.

If not incorporated, is the applicant auspiced by an incorporated association for the purposes of this grant?

○ Yes ○ No

Unincorporated groups applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.

Do you hold Public Liability Insurance? *

○ Yes ○ No

If yes, please provide your insurance details here

If the group does not hold its own Public Liability insurance, please provide details of who will provide Public Liability insurance for your project.

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.

Auspice Organisation Details

Name of auspice organisation *

Organisation Name

Auspice incorporation registration number? *

Incorporated Association or Australian Corporation Number

Auspice organisation's website

Must be a URL.

Auspice Primary Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Auspice Postal Address

Address

If different to primary address

Primary contact person at auspice organisation *

Title   First Name   Last Name

We may contact this person to verify that this auspicing arrangement is valid and current.

Position held in organisation *

e.g. Manager, CEO

Auspice contact person's primary phone number *

Must be an Australian phone number.

Auspice contact person's email address *

Must be an email address.
Where possible, this should be the email of the auspice organisation, not a personal email address as we will use this email to correspond with you for the life of the grant.

Please attach a letter from the auspice organisation confirming this arrangement is valid and current *

Attach a file:

We can only accept Microsoft Office files, jpegs or pdf documents. Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.We can only accept Microsoft Office files, jpegs or pdf documents

Does the auspice organisation have an Australian Business Number (ABN)? *

○ Yes ○ No

If the auspice organisation does not have an ABN, they will be required to submit a completed ATO Statement by a Supplier Form if the application is successful. If this form is not submitted, Council is required to withhold 48.5% of any approved grant. Please refer to the ATO website for further details.

Grant eligibility requires the applicant to hold a $20million Public Liability insurance policy

Do you hold Public Liability Insurance? *

○ Yes ○ No

If Yes, please p ovide your insurance details here

If the group does not hold its own Public Liability insurance, please provide details of who will provide Public Liability insurance for the project.

ABN of auspice organisation *

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.

Financial Information

* indicates a required field

Current financial position

If the applicant has substantial funds in operating accounts or savings or term deposits, Council needs to know if there are any financial commitments. If funds are set aside for a particular purpose, you should clearly explain what the funds are to be used for. The applicant needs to demonstrate why the project cannot be completed within existing funds.

For applicants that are auspiced or goverened by a peak body, Council is interested in the applicants financial situation i.e. the local group not the auspice/peak bodies.

Applicants with substantial $ in bank accounts who do not provide an explanation as to what the money is allocated for will be considered a lower priority.

Applicants current operating account balance *

$ [   ]
Must be a dollar amount.

Does your group have any savings, investments or term deposits in other accounts? *

○ Yes   ○ No

If yes, provide details of current balance in savings, investments and term deposits

$ [   ]
Must be a dollar amount.

Provide details of what the funds held by the applicant are set aside for, include any funds in the operating account as well as other accounts held by the applicant. Let us know about any financial commitments the applicant has including regular payments such as staffing/rent/insurance etc *

[   ]

Annual Report & Financial Statements

Applicants need to demonstrate that they have appropriate governance structures in place and are in a sound financial position to be eligible for funding.

In support of your application please provide

- a copy of your most recent annual report
- your most recent financial statement (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position). Bank statements are not suitable as they may contain personal information and should not be attached.

Upload your most recent Annual Report here
Attach a file:

We can only accept Microsoft Office files, jpegs or pdf documents

or

Provide a web link to your Annual Report

Must be a URL.

Upload your financial statement here *
Attach a file:

We can only accept Microsoft Office files, jpegs or pdf documents

Applicant information

* indicates a required field

What is your groups purpose or mission? *

Why does your group exist? What do you aim to achieve? What services/programs/activities does your group provide?

How long has your group been operating? *

Which municipality and/or suburbs does your group provide a service to? *

Is your group membership based? *

○ Yes   ○ No

Are people required to sign up to be part of your group/organisation? Do they pay an annual fee for membership? Please note, simply having a committee of management does not mean you are a membership based group.

Membership based groups

How many current members do you have? *

How many of these current members are Banyule residents?

Groups without members

For groups that are not membership based, how many Banyule residents would you provide a service for weekly/monthly/annually?

Gender Impact Assessment (GIA) Information

Under the Victorian Gender Equality Act Banyule City Council is required to conduct a Gender Impact Assessment for the grants program. This process aims to gather information and data to understand the identities of those accessing our grants programs and those who are not, with the goal of enhancing accessibility for all. This information is confidential and does not have any weighting in your grant application outcomes. It is purely about the Continuous Improvement of the grants program at Banyule City Council.

Do the members of your groups committee / leadership identify with any of the following groups? *
- ☐ Aboriginal and/or Torres Strait Islander
- ☐ Refugee, asylum seeker, migrant or culturally diverse
- ☐ Religious minority
- ☐ Person living with a disability or chronic illness
- ☐ Carer for people with disability or illness
- ☐ LGBTIQA+
- ☐ Aged 18-24
- ☐ Aged 65+
- ☐ Prefer not to say
- ☐ None of the above
- ☐ Other:

Please select all that apply

Does your organisation work primarily with or support any of the following groups? *
- ☐ Women
- ☐ Men
- ☐ Gender diverse or transgender people
- ☐ LGBTIQA+ community
- ☐ Children (under 15 years)
- ☐ Young People (15-25 years)
- ☐ Older adults (over 65 years)
- ☐ People living with disability
- ☐ Carers for people with disability or illness
- ☐ Aboriginal and/or Torres Strait Islander people
- ☐ None of the above
- ☐ Other:

Please select all that apply

Project Details

2024 - 2025 Community Grants - Training & Development
Form Preview

To strengthen organisational capacity and skill sets including online learning and webinars, training courses and professional development opportunities.

This grant is targeted to groups that are not supported by state or federal funding and rely on other sources of income to fund training. This category supports the ongoing sustainability of local community groups and services.

Project Title *

Provide a name for your project/program/initiative. Your title should be short but descriptive

Total grant amount requested *

$

Must be a dollar amount and no more than 5000.
What is the total financial support you are requesting in this application?

Provide a short summary of your project *

Word count:
Must be at least 25 words.
Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes)

Why is this project needed? *

Word count:
Must be at least 25 words.
What training and/or development needs has the group identified .What is the community need, issue or opportunity that the training is responding to? Who has been consulted to identify the need? Who are the intended beneficiaries/participants ?

What will the project deliver? *

Word count:
Must be at least 25 words.
Provide details of the training and/or development you are seeking funds for including the number of participants,when and where the training will be delivered, who will deliver the training etc

What do you want the project to achieve?

What will be the benefit of your proposal for your service, the individuals you work with , the community? Will the project have long term inpacts for the group?

How will this training/development opportunity be offerred? *

○ Face to face   ○ Online   ○ Combination of both

How many Banyule residents will benefit from the project? *

We encourage all applicants to consider access, equity and inclusion for all members of Banyules diverse community in the delivery of your project. This includes but is not limited to, people living with disability or chronic illness (including neurodiversity), people who identify as LGBTIQA+, Aboriginal and/or Torres Strait Islander people, people experiencing financial disadvantage (including people who are homeless or at risk of homelessness) and our multicultural and multi-faith community.

Please describe the measures in place to ensure your project is as accessible and inclusive as possible. *

Is your project seeking to address barriers to participation or access for any of the above groups or any other minority groups ? Please include any details on specific strategies you would implement as part of your project.

Does the group have the necessary capacity, experience and skills to deliver the project? *

Will you be partnering with any other groups to deliver this project? *

○ Yes   ○ No

If so, provide details of the contribution the partner/s will make to the project here.

If you wish to provide a letter of support from your partner for this project, please attach it here.

Attach a file:

We can only accept Microsoft Office files, jpegs or pdf documents. Please note, general letters of support are not required, please only upload letters from project partners.

Project timelines

Start Date *

Must be a date and no earlier than 31/8/2024.

End Date *

Must be a date and no later than 31/8/2025.

Project Plan

Provide a project plan outlining the key actions/ tasks, resources required, the persons responsible and the timeframes for the project.

Applicants should ensure that the project plan is realistic, i.e. you can feasibly deliver the expected outcomes in the timeframe and have the resources to deliver according to the plan.

Please refer to the guidelines for a sample project plan template.

Upload project plan here *
Attach a file:

Overall Project Budget & Council Grant budget

* indicates a required field

Please provide overall budget details for the project as well as expenditure details for the grant amount you are requesting from Council.

Overall Project budget

Total project cost *

$

Must be a dollar amount.
What is the total budgeted cost of the project ? This can be different to the total grant amount requested.

Overall Project Budget Income & Expenditure

Please outline your project budget in the table below.

You will need to submit a clear, balanced budget which describes and itemises the total cost of the project.

This means that you should include all aspects of the project- those you are not seeking a council grant for as well as the items you want the grant to cover.

Income column should

- include all funds and resources required to support your project.
- list the grant requested from Council in the income column.
- provide details of all other income for the project including from other grant programs, fundraising, donations, participant fees, in kind support etc.

Expenditure column should

- include all costs associated with the project including any goods or services required and any in kind support that is contributing to the project.
- You don't need to provide costs for individual expenses here, this will be provided in the Council Grant budget section. e.g.you can list First aid training $1000 rather than 5 participants @ $200 each.

In kind support should

- be included in both the *income* and *expenditure* columns
- include things such as volunteer or staff time, donation of goods or services, use of a venue at low/no cost, contributions to promotion and marketing etc.

You may include GST in the cost of budget items where applicable.

Income and expenditure must balance.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

Please **do not add commas** to figures – e.g. type $1000 not $1,000 – this will ensure your figures for each table total correctly

Overall Project Budget

Income	$	Expenditure	$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$

Overall Project Budget Totals

Total Income Amount

$

This number/amount is calculated.

Total Expenditure Amount

$

This number/amount is calculated.

Income - Expenditure

$

This number/amount is calculated.

Council Grant budget

When preparing a budget for your project please consider the following important components:

- Due to limited funding, applicants may only receive part funding. Therefore it is important to ensure that your budget is as detailed as possible

- Ensure you provide details for each item of equipment or expense you wish to pay for with the grant.
- Please specify number of items and cost per item in the expenditure column. e.g. 2 participants @ $175.00 each.
- Please specify total for each "type" of expense in the total column e.g. $350.
- Do not write refer to quote- we require you to enter the details in the budget.

You may include GST in the cost of budget items where applicable.

Please **do not add commas** to figures – e.g. type $1000 not $1,000 – this will ensure your figures for each table total correctly

Grant requested *

$

Must be a dollar amount.

Council Grant allocation

Expenditure	**$**
	$
	$
	$
	$
	$
	$
	$
	$

Budget Totals

Total Expenditure Amount

$

This number/amount is calculated.

Quotes

Evidence of the cost of budget items is required for all applications. Anything that you plan on paying for with the grant requires a quote or estimate of cost.

Quotes need to be provided for anything you are buying in from external sources, including staffing.

A minimum of one quote is required for each component of the project.

Quotes should be provided by reputable suppliers and must include the business name and a description of the item. These can be in the form of • formal written quotes • scanned images or screen shots from online stores/catalogues.

Quotes should be no more than 6 months old.

Estimates of cost can be submitted for resources that are being sourced from within the group, including staffing and other aspects of the project where a formal quote is not possible.

Please attach 1 quote or estimate of expense for each aspect of the project. *
Attach a file:

[   ]

We can only accept Microsoft Office files, jpegs or pdf documents

Grants from other sources

Have you applied to other grant programs for funding for other parts of this training project? *
○ Yes   ○ No

If so, is this project dependent on the success of the other funding application/s?
○ Yes   ○ No

Have you applied to other grant programs for funding for the same training/ development expenses? *
○ Yes   ○ No
If your application to another funding source is successful whilst the Council grant round is open, you are required to notify Council so the application can be witthdrawn.

If yes, who did you apply to, how much did you apply for, and when is the outcome of your application expected?

[   ]

Part funding

If Council can only provide part funding for the training/development expenses can the project proceed? *
○ Yes   ○ No

If yes, provide details here - what is the minimum grant amount required and what would you pay for with the reduced grant amount?

[   ]

Declaration and Privacy Statement

* indicates a required field

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

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of offer.

I certify that the application has been submitted with the full knowledge and agreement of the management of my organisation/group and if appropriate, with the full knowledge and agreement of our auspice for this grant application.

I understand that the collection and handling of personal information will be conducted in accordance with Banyule City Council's Privacy Policy which is displayed on Council's website and is available for inspection at Council's customer service centre. The information is being collected and used to enable panel members to assess and allocate grant funds and to contact you in relation to your submission. This is done in accordance with Council's powers, functions and purposes under the Local Government Act 2020 and other relevant legislation.

I understand that Council makes certain information publicly available in accordance with legislation and the Banyule Public Transparency Policy and that a listing of donations and grants including the names or persons or bodies that have received grants are made publicly available. (This information is available on Councils website. Individual names are not published on Council's website, this information is only available at Council offices)

Should you need to change or access your personal details, please contact us on 9490 4222 or via enquiries@banyule.vic.gov.au

Banyule City Council will be contacted immediately if any information provided in this application changes or is found to be incorrect.

I have read the 2024 - 2025 Community Grant Guidelines and have complied with the grant requirements. *
○   Yes

I have attached all documents as required and complied with eligibility criteria *
○   Yes

Name of authorised person *

Title   First Name   Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

I am authorised by the grant applicant and/or the auspice for this application, to complete this declaration and have read and understood the declaration and privacy statement above. *
○   Yes

Date of declaration. *

<div style="border:1px solid #ccc; padding:10px; width:300px;"></div>

Must be a date.

Please indicate how you heard about the Banyule Community Grants program *

☐ Banyule City Council Website ☐ Banyule Banner ☐ Local media ☐ Social media ☐   Network email/newsletter

Other

<div style="border:1px solid #ccc; padding:10px; width:200px;"></div>

Choose as many as applicable

Would you like to receive information via email about other funding opportunities through Council and/or other external grant providers? *

○ Yes   ○ No

If you responded yes to the above question, please provide the email address to be used for future information about funding opportunities.

<div style="border:1px solid #ccc; padding:10px; width:450px;"></div>

Must be an email address.