

Essential Grants Application Form 2026/27

Form Preview

Essential Community Grants 2026/2027

* indicates a required field

Categories

If none of the categories below apply to your activity, please apply for a Small Grant.

Which categories are you applying for Essential Grant?

- ☐ Insurance coverage
- ☐ Essential training for volunteers
- ☐ Utility bill
- ☐ Utility bill 'shocks'

Applicant type

Applicant type

- ☐ Registered legal entity (such as an incorporated association)
- ☐ Auspicing organisation on behalf of individual
- ☐ Non-incorporated group
- ☐ Auspicing on behalf of a non-incorporated group

Organisational Eligibility

Does your organisation...

Provide or advertise any type of Gambling? *

- ☐ Yes
- ☐ No

Provide or advertise any type of tobacco or vaping products? *

- ☐ Yes
- ☐ No

Have an outstanding debt with the City? *

- ☐ Yes
- ☐ No

Have an outstanding acquittal with the City? *

- ☐ Yes
- ☐ No

Organisational History

Has your organisation...

Received any other grants or funding from the City in the past 3 years? *

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- ☐ Yes
- ☐ No

Got a Lease, license or management agreement with the City?

- ☐ Yes
- ☐ No

Received any asset donations (e.g. harddrives, monitors) from the City in the past 3 years? *

- ☐ Yes
- ☐ No

Do you have a Sponsorship Agreement with the City?

- ☐ Yes
- ☐ No

Eligibility Criteria

Thank you for applying to the City of Greater Bendigo Small Community Grant Program.

If you have had any questions flag with an asterisk * that are listed above, Please refer to our Community Grant Guidelines, Grants Policy and Appendices located via our Community Grants Webpage. If you have any further queries, please contact a Grant Officer via 1300 002 642 or grants@bendigo.vic.gov.au.

If there are no asterisks listed, please continue the application.

Organisation Details

* indicates a required field

Organisation Details

Organisation Name *

Organisation's 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.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

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Tax Concessions

Main Business Location

Must be an ABN

Postal Address

Address

Primary Website (if applicable)

Must be a URL

Head of Organisation *

Title

First Name

Last Name

Head of Organisation telephone contact *

Head of Organisation email address: *

Is your organisation an auspice for this application? *

- ☐ Yes
☐ No

Auspice

Not-for-profit community organisations in the process of becoming incorporated, or those without capacity to manage the funding, may arrange for an eligible organisation to apply on their behalf. This is known as an 'auspice' arrangement.

Further details regarding auspice arrangements can be found at [Community Grants webpage](#)

Name of auspicing organisation: *

Address of auspicing organisation *

Contact name: *

Contact email: *

Must be an email address.

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Date of agreement *

Must be a date.

Auspice agreement form

Attach a file:

Sign here *

Contact for Application

Contact Name *

Title

First Name

Last Name

Position held *

Contact number: *

Contact email *

Must be an email address

Organisation Details

Activity name *

Briefly describe the activity *

Word count:

Must be no more than 200 words.

Provide a brief overview of the activity you are organising.

Activity Details

*** indicates a required field**

Will the activity...

Involve works on land or to a building not owned or managed by your organisation? *

- ☐ Yes
☐ No

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Involve works in/ around waterways or with animals or plants? *

- ☐ Yes
☐ No

Require any permits? *

- ☐ Yes
☐ No

When will the activity take place?

Expected start date: Must be a date 4 - 6 weeks from today *

Must be a date.

Expected finish date: *

Must be a date.

Where will the activity take place? *

Word count:

Must be no more than 25 words.

For example - in Elmore; across the whole Greater Bendigo municipality)

Assessment criteria

*** indicates a required field**

Why? - 35% weighting (merit)

Why is the activity needed and important? - 17.5% *

Word count:

Must be no more than 250 words.

How will your organisation know if it has been a success? - 17.5% *

Word count:

Must be no more than 250 words.

Who? - 35% weighting (benefits)

Who will benefit from the activity? - 17.5% *

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Word count:
Must be no more than 250 words.

How will they benefit from it? - 17.5% *

Word count:
Must be no more than 250 words.

How? - 20% weighting (capacity)

What needs to be done to complete the activity? *

Word count:
Must be no more than 250 words.

Who will do these tasks? *

Word count:
Must be no more than 250 words.

When will these tasks need to be completed by? *

Word count:
Must be no more than 250 words.

Activity budget

* indicates a required field

Use the following tables to explain what the activity will cost (expenditure) and where your organisation is planning to get the money from (income). Note: The expenditure and income totals should match.

Income

Please list all income for your activity.

Income Details

Amount \$

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Grant amount requested(maximum \$2,000)	
Organization contribution	
Other income/funding	
Please don't add commas to figures, eg. write \$1000 not as \$1,000	Must be a dollar amount.

Expenditure - Please ensure that total income equals total expenditure

Please list your activity cost below including an asterisk * next to items the grant will be spent on.

Other activity costs

Amount \$

What is the organisation's contribution?	Must be a dollar amount.
	\$
	\$
	\$
	\$
	\$
	\$

Budget Totals

Income amount

\$

This number/amount is calculated.

Expenditure total

\$

This number/amount is calculated.

Grant requested total - Maximum \$2,000 *

\$

Have you obtained quotes for the activity? *

☐ Yes

☐ No

☐ Not applicable

Attach itemised quotes

Attach a file:

Sustainability - 10% weighting

How long are the activity's benefits likely to last for? - 10% *

☐ Up to 3 months

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- ☐ Between 3 months and 1 year
- ☐ For more than 1 year

Support Material:

If applicable, please attach any support material.

Attach Files:

Attach a file:

Please note: If you're having any issues completing your application, please contact a Grants Officer via email at grants@bendigo.vic.gov.au or call us on 1300 002 642

Declaration and Privacy Statement

* indicates a required field

I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the management of my organisation/group.

I have read the accompanying guidelines for applicants provided with this application form.

I agree that I will contact the Strong Communities Team immediately if any information provided in this application changes or is incorrect.

*The Greater Bendigo City Council (the **City**) is a body corporate constituted as a municipal Council under the Local Government Act 2020. The City handles all personal information it collects in accordance with the Privacy and Data Protection Act 2014 (Vic) and our Privacy Policy - available here <https://www.bendigo.vic.gov.au/About/Document-Library/privacy-policy-pdf>.*

The information collected by us, or on our behalf, will be used to do anything necessary to facilitate the City's Community Grants Program, including but not limited to receiving applications, assessing applications, entering into funding agreements, administering payments, and receiving evaluations and acquittals.

Some or all of the information we collect will be used internally at the City and may also be disclosed to third parties involved in the City's Community Grants Program, including the Community Assessment Panel and/or other similar bodies.

If you do not provide us with this information, we will be unable to assess your application, enter into a funding agreement with you or administer a payment to you.

You have a right to access personal information that we hold about you, subject to any exceptions in relevant legislation. Should you wish to discuss the collection of your personal information you can contact us at grants@bendigo.vic.gov.au.

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I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge.

I am authorised to complete this application and have read and understood the declaration and privacy statement *

☐ Yes

Authorised Person's Name *

Title	First Name	Last Name

Position held *

Date of declaration *