

# Small Grant Application Form

## Form Preview

### Small Community Grants 2024/2025

\* indicates a required field

#### 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? \***

- ☐ 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

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### 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](mailto: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.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN

**Postal Address**

Address

  

**Primary Website (if applicable)**

Must be a URL

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**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.

**Date of agreement \***

Must be a date.

**Auspice agreement form**

Attach a file:

**Sign here \***

Contact for Application

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**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.

## Project 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

**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: \***

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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% \***

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)

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### 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

Include the value of (if applicable): • Volunteer labour record at a rate of \$46.62 per hour. • Skilled in-kind labour can be calculated at industry rate. • The cost of any permits required for the project • Venue hire fees (including Council venues)

Income - select an option below	Amount \$
If viewing offline the following options in the drop-down box are: Community Grants funding requested, Other funding/income, In-Kind support (inc unskilled labour) and other	Must be a dollar amount.
	\$
	\$
	\$

### Expenditure (1) - requested grant amount

Please detail the expenses for the requested grant amount e.g. IT equipment, white goods, supporting an event

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Expenditure Description	Expenditure Amount \$
Please don't add commas to figures, eg. write \$1000 not as \$1,000	Must be a dollar amount.

### Expenditure (2) - Organisation contributions

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

### Budget Totals

#### Requested grant expenditure amount

\$

This number/amount is calculated.

#### Organisations contribution total

\$

This number/amount is calculated.

#### 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

☐ 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**

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email at [grants@bendigo.vic.gov.au](mailto: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](mailto:grants@bendigo.vic.gov.au).*

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



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Position held \*

Date of declaration \*