Introduction

* indicates a required field

Before completing the application form, you should have read the Community Grants Program Guidelines.

Late applications will not be accepted. Failure to include all information requested may result in the application being ineligible for funding.

Please note that most fields in this form are mandatory and if not completed your form will not be able to be submitted. An error message will highlight which questions require completion.

All documents attached in this application must be clearly labelled to ensure they are easy to locate, open and view.

Privacy Notice

City of Moreton Bay is collecting your personal information for the purpose of assessing your funding application and/or finalising your funding application requirements. Council will use your personal information to update Council's customer information records and to contact you about other functions and services of Council. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

If you contact us throughout the application process, please quote the application ID below.

Application ID

This field is read only.

Confirmation of eligibility

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. Before proceeding, please confirm the following:

- *I have read and understood the program guidelines;*
- *Our organisation is an eligible entity type for this grant as listed on page 8 of the guidelines;*
- *Our organisation is able to provide recent audited or verified financial statements;*
- *Our organisation does not have any outstanding debts to Council;*
- *Our organisation does not have any overdue acquittal reports due to Council;*
- *Our organisation has $20 million public liability insurance for the project;*
- *We have discussed and received support from the organisation's management committee or board for this funding request.*

If you have any questions in regard to these eligibility criteria, please contact Community Grants and Partnerships on (07) 3205 0555 or at grants@moretonbay.qld.gov.au.

The statements above are true and correct *

○   Yes, I agree to the above

If you are unable to agree to the above statements, you are not eligible for this grant.

Contact details

* indicates a required field

Applicant details

Organisation name *
Organisation Name

Official entity, group or organisation name (no acronyms). Please ensure your organisation name is the same as the name on your ABN Lookup.

Organisation street address
Address

Organisation postal address
Address

If entering a PO Box address, start by typing in the PO Box, click "Can't find your address?" and then manually enter the postal address.

Organisation website or social media page

Must be a URL.

What type of not-for-profit eligible organisation are you? *
○   Incorporated association
○   Registered charity
○   Company limited by guarantee (that is not a registered charity)
○   Unincorporated organisation (select this if you are being auspiced)

Is the organisation one of the following? *
○   School or affiliated parents' association
○   Kindergarten or child care organisation
○   Church
○   Political group
○   Government department or agency

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○ Unincorporated organisation (not being auspiced by an incorporated association)
○ None of the above

Proof of not-for-profit status *
Attach a file:

E.g. certificate of incorporation or constitution

Based on the above response, the organisation is ineligible to apply for this grant. Please refer to page 8 of the [Community Grants Program Guidelines](#) for applicant eligibility or contact the Community Grants and Partnerships Unit on (07) 3205 0555 to discuss this application.

IF SUBMITTED, THIS APPLICATION WILL NOT BE CONSIDERED AND NO FURTHER NOTIFICATION WILL OCCUR.

Does the organisation have an ABN? *
○ Yes
○ No

Applicant 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	

Contact for application

Contact name *
First Name   Last Name

Position in organisation *

Phone number *

Must be an Australian phone number.
Including area code.

Email address *

Where possible, please provide an organisational address (e.g. president@yourclub.com.au) rather than a personal address.

Auspice information

* indicates a required field

Unincorporated organisations must be auspiced by an incorporated association to apply for this grant.

Please refer to the grant guidelines for applicant eligibility criteria or contact the Community Grants and Partnerships Unit on (07) 3205 0555 or grants@moretonbay.qld.gov.au to discuss this application.

Auspice organisation details

Auspice organisation name *
Organisation Name

Official entity, group or organisation name (no acronyms). Please ensure your organisation name is the same as the name on your ABN Lookup.

Auspice street address *
Address

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

Auspice postal address *
Address

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

If entering a PO Box address, start by typing in the PO Box, click "Can't find your address?" and then manually enter the postal address.

Auspice website or social media page

Must be a URL.

What type of eligible organisation is the auspice? *
○ Incorporated association
○ Registered charity
○ Company limited by guarantee (that is not a registered charity)

Does the auspice organisation have an ABN? *
○ Yes
○ No

Auspice 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.

Please attach a letter from the auspice organisation confirming their support for the application, project, and willingness to auspice the grant *
Attach a file:

Auspice organisation contact

Contact name *

First Name

Last Name

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

Position in organisation *

Phone number *

Must be an Australian phone number.
Including area code.

Email address *

Where possible, please provide an organisational address (e.g. president@yourclub.com.au) rather than a personal address.

Project details

* indicates a required field

Project title *

Word count:
Title should be short but descriptive (Max.15 words).

Provide a short description of what the organisation plans to do *

Word count:
What are you planning to do and why? (Max. 100 words)

Street address where the project will be delivered *

Street (including number), suburb, state and postcode required.

Anticipated project start date *

Anticipated project end date *

Please refer to the eligible Project start dates on page 7 of the Community Grants Program Guidelines.

Assessment questions

Please refer to the Assessment Criteria on page 11 of the [Community Grants Program Guidelines](#) when answering the questions in this section.

Why is this project needed? *

Who needs this project and why? How was this need identified? Is there a gap in services? Where possible, support your claims with evidence (data, statistics, testimonials etc) that confirms this need.

Who will benefit from this project? *

How will the project benefit your organisation, intended beneficiaries and / or City of Moreton Bay residents?

How does this project contribute to one of the priorities for this grant? *

Respond to at least one of the grant priorities on page 5 of the Guidelines.

What consideration have you given to ensuring this project will be inclusive and accessible? *

Refer to the Definitions for inclusive and accessible on page 12 of the Guidelines.

What consideration have you given to reducing the amount of waste this project may generate? *

E.g. use of recyclable or compostable food containers and cutlery, online resources instead of printing etc. For further information visit Coucil's [Waste, recycling and organics webpage](#).

If you plan to run this project again, how will you ensure it will be financially sustainable, without relying on Council funding? If this is not applicable, write 'N/A'. *

Will the project generate income? Are there financial partners or other sources of income?

What will be the impact on your organisation if you don't get this grant? *

How will the project be promoted? *
☐ Social media   ☐ Signage e.g. billboard, corflutes, banners

- ☐ Website
- ☐ Newsletter
- ☐ Brochures, flyers

- ☐ Print media e.g. newspaper, magazine
- ☐ Community radio
- ☐ Other: _____

Focusing on inclusion

Through this grant program, we are committed to improving engagement and representation of the following groups.

Will your project specifically benefit any of the following inclusion focus groups? *

- ☐ Aboriginal and Torres Strait Islander peoples
- ☐ Culturally and Linguistically Diverse peoples
- ☐ People with disability
- ☐ People who identify as LGBTQIA+

- ☐ Women and girls
- ☐ Young people
- ☐ Older people
- ☐ None of these

No more than 3 choices may be selected.

How will you make the project inclusive for this / these specific group/s? *

Project plan

What are the major stages/steps involved in delivering your project?

If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.

Stage	Completion date	Notes
	Provide approximate date. Must be a date.	Add explanatory notes if required

Project risks

Describe any / all of your projects risks, hazards and barriers *

This might include bad weather, financial, strategic or reputational risks, injury or illness, supplier delays or unavailability etc.

Describe what you will do to address these risks *

This might include undercover venues, alternate financial support or income streams, access to more volunteers or human support.

Project outcomes

Outcomes

Please tell us at least one outcome you expect from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct or indirect) of your project.

Immediate outcomes occur directly following project completion, medium-term outcomes are those that fall between the short and long-term outcomes and long-term outcomes are those you expect to see later.

Below are example outcomes running workshops for adult literacy for employment:

- Immediate outcome - workshop attendees will have an improved level of literacy.
- Medium-term outcome - increased job interview opportunities or employment.
- Long-term outcome - workshop attendees have secured employment.

If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.

Your outcomes	Timeframe

Project budget

Project income

- Include all income sources if relevant, including the grant amount being requested, cash contribution or fundraising.
- This grant provides funding of up to $20,000.
- Applicants can receive up to $50,000 per financial year across the Community Activities and Community Facilities grants.
- If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.

Example budgets [PDF 892.9kB]

GST Information

- All quotes and project budgets must be GST inclusive.
- An applicant/organisation's GST registration status will not impact the total amount paid if successful.
- Click here for an online GST calculator to assist with your budget.

Income description	Is funding confirmed?	Income amount (A)
E.g. Council grant or Fundraising activities		Must be a dollar amount.
Council grant		

Project expenditure

- **Item description** - list each item on a separate line.
- **Item cost** - the total cost of the expenditure item.
- **Grant contribution** - the portion of the item cost covered by the grant funding (this may be the same as the **Item cost**).
- **Supplier name** - the business supplying the product or service.

- **Quotes** - Council will accept up to $1,000 of project expenses without quotes however, expenses above this amount must have quotes. For example, if you are requesting $1,600 you must have quotes for at least $600 worth of expenses.

Refer to page 9 of the Community Grants Program Guidelines to ensure your expenditure items are eligible under this grant.

If you require more rows click the add more button. If you add more rows than you need, ensure you remove them before submitting.

Item descriptionItem cost (B)		Grant contribution (C)	Supplier name	Quotes
e.g. Venue hire, entertainment etc.	e.g. $1,000	e.g. $800		
	$	$		

Budget totals

Total income amount (A)	Total expenditure amount (B)	Income less expenditure (A - B)
$	$	$
This amount is automatically calculated.	This amount is automatically calculated.	This amount is automatically calculated. Income less Expenditure must equal zero.

Total grant amount requested (C)

$

This amount is automatically calculated. Max. $20,000 funding.

Supporting documents

* indicates a required field

All documents must be clearly labelled to ensure they are easy to locate, open and view.

As your application is being auspiced, you must provide Financial Statements and Public Liability Insurance in the name of the auspice organisation.

Financial statements should be no more than 18 months old and include the following:

- a profit and loss statement (for income and expenditure)
- a balance sheet (for assets and liabilities)
- all mortgages, charges and securities that affect any of your property at the end of the financial year
- a copy of a signed audit report or verification statement from your accountant, auditor or verifier - the type of report depends on the size of your association.

To find out more about annual reporting requirements, visit the Queensland Government's [Financial responsibilities for incorporated associations webpage](#).

Most recent audited or verified financial statements *
Attach a file:

Current public liability insurance certificate *
Attach a file:

Date of expiry of insurance cover *

Must be a date.

Do you need Council approval to undertake this project?

Projects on Council-owned and controlled land that enhance native vegetation and wildlife habitats require a Council approval letter. To seek approval, email your project proposal to Council's Environmental Services team then attach your approval letter here.
Attach a file:

Environmental Services: esmailbox@moretonbay.qld.gov.au.

Events on Council or private land may also need approval. Check here to see if your event requires approval: [Planning an event in Moreton Bay](#).

I have read and understand the requirements of planning an event in Moreton Bay mentioned above: *
○ Yes

Additional documents to support your application

Attachments must be clearly labelled to ensure they are easy to locate, open and view. Additional documents for this grant may include:

- Project management spreadsheets
- Event budgets
- Minutes of planning meetings
- Media plans
- Promotional collateral
- Letters of support from key collaborators grand project partners that describe how they will contribute and / or benefit from the project. Letters must be dated and include the contact details of the author.

Attach a file:

Declaration and feedback

* indicates a required field

Declaration

This section must be completed by a member of the management committee or board on behalf of the applicant organisation. This may be different to the contact person listed earlier in this application form.

I declare that to the best of my knowledge the statements made in this application are true and correct, and I understand that if our organisation is approved for this grant, we will be required to accept the terms and conditions of the grant.

I agree *
○ Yes

Name *
First Name   Last Name

Position in organisation *

Auspice Declaration

This section must be completed by a member of the management committee or board on behalf of the auspice organisation. This may be different to the contact person listed earlier in this application form.

I declare that to the best of my knowledge the statements made in 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 on behalf of the applicant organisation for the grant.

I agree *
○ Yes

Name *
First Name   Last Name

Position in organisation *

Applicant feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback. If you would rather provide anonymous feedback, please email grants@moretonbay.qld.gov.au.

Please indicate how you found the online application process
○ Very easy
○ Easy
○ Neutral
○ Difficult
○ Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

Submit

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. DO NOT SUBMIT THIS APPLICATION UNTIL ALL REQUIRED INFORMATION AND SUPPORTING DOCUMENTS HAVE BEEN PROVIDED.

You are now ready to submit. Read and acknowledge the message below, then click on 'Next page' to review, then Submit. *
○   You will receive a confirmation email when your application has been submitted. If you do not receive this email then your application has NOT been submitted. Please ensure all questions have been answered and try again. (Check box here to acknowledge that you understand this)