Information for applicants

* indicates a required field

Let's get started...

Before completing this application form, please read the Community Funding Scheme guidelines and discuss your project with the Community Development Grants Team on **5422 0216** or **grants@mrsc.vic.gov.au**. You may also need to speak with other Council Officers to prepare your application, such as Council's Facilities team for category 3 infrastructure projects. The grants team will be able to support you to get in touch with other Council Officers.

You can find the guidelines, scoring matrix and other useful documents including a checklist for completing your application on Councils website.

A grant trouble-shooting clinic will be held while applications are open, to register to attend click here.

Here is a list of items/documents you will need for this application:

- ABN number. *If you do not have an ABN number, you will need to complete a Statement of Supplier Form.*
- Public Liability Insurance (please check expiry date).
- Incorporation number.
- Child Safe Policy and the Child Safe Direct Contact Checklist or a Child Safe Statement of Commitment for incidental contact with children (templates can be found on Council's website).
- Letters of community support *(not from your own organisation).*
- Quotes
- Financial Statement and AGM minutes or Annual Report
- Other - plans, drawings, permits, in principal approval/permission from the landlord/owner (eg MRSC, DEECA, Parks Victoria etc), lease agreement (if applicable).

Please note: If you do not have an incorporation number and/or public liability insurance, you will need an incorporated organisation as an auspice for the purpose of this grant.

Incomplete applications and/or applications received after the closing date will not be considered. If you have any questions or require any support, please contact the grants team (see details above)**.**

Remember to save as you go to avoid losing any of your work. You may also find it easier to prepare your answers in a word document first and copy and paste into the form when complete.

Program

This field is read only.

If you do contact us throughout the application process, please quote the application number below:

Application Number

This field is read only.

Confirmation of Eligibility

I confirm that the applicant ...

- has read and understands the program guidelines
- has discussed their application with the Grants Team.
- is a not-for-profit organisation (includes educational institutions such as public schools and kindergartens)
- is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- is located in (and/or supplies services to) the Macedon Ranges Shire
- is able to demonstrate financial viability
- does not owe any acquittal reports or money to the Macedon Ranges Shire Council as a result of previous funding or grants
- has the appropriate type and level of insurance for the activities that are the subject of this grant. (If you do not have current Public Liability you will need an Auspice for the purpose of this grant).
- is not an individual, a political organisation, for profit/commercial organisation or Government agency.
- does not receive direct income from electronic gambling machines and/the event does not promote or involve gambling-related activities.
- is able to demonstrate compliance with Child Safe Standards

Please select below: *
○ Yes
You must confirm that all statements above are true and correct.

Who was the key Council Officer that you spoke with in regards to this application? *

Please note the date you spoke with this Council Officer. *

Must be a date.

Organisation Contact

* indicates a required field

Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012.* To view our privacy statement, click **here**.

Organisation Contact Details

Please note, this section refers to the organisation applying for the grant.

Organisation Name *
Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Primary address
Address

Primary phone number *

Must be an Australian phone number.
If the form does not recognise as a valid number use the following format +61354220216

Primary email *

Must be an email address.

Primary contact person *
First Name   Last Name

This is the person we will correspond with about this grant. Title can be left blank if preferred.

Position held in organisation *

e.g., Manager, Board Member or Grants Coordinator.

Certification

I declare I am authorised by my organisation to submit this application on their behalf. 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 approval and funding agreement. I understand funding maybe subject to funding conditions.

I agree *   ○ Yes

Date *

Must be a date

Organisation Details

* indicates a required field

ABN Details

Does your 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	

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application. Download the form from the ATO website.

Please upload completed Statement of Supplier Form: *
Attach a file:

Please ensure you name the file correctly, e.g Group Name - Statement of Supplier formMax 25mb per file uploaded

Public Liability Insurance

Does your group/organisation have current public liability insurance? *
○ Yes   ○ No

If your group/organisation does not have public liability, it will need an Auspice for the purpose of this grant.

Public Liability Insurance

Please attach a current copy of your organisation's public liability insurance. *
Attach a file:

Before you upload your file, please name it correctly, e.g. Group Name - Public Liability Insurance

Incorporation status

Is your group/organisation incorporated? *
○ Yes   ○ No
If your group is not incorporated you will need an Auspice for the purpose of this grant.

Incorporation details

If you wish to check you incorporation number please click here and use the back arrow to return to this page.

What is your incorporation number? *

Incorporated Association or Australian Company Number.

Auspice Information

* indicates a required field

Is your organisation auspiced by another organisation for the purpose of this grant? *
○ Yes
Unincorporated organisations or organisations without public liability insurance must be auspiced by an incorporated organisation for the purpose of this grant. If you do not have an auspice please contact Community Development Grants Team for advice on 5422 0216.

Auspice Organisation Details

Auspice Organisation Name *
Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Auspice primary address

Address

Auspice phone number *

Must be an Australian phone number.

Auspice email address *

Must be an email address.

Primary contact person at Auspice organisation *

First Name
Last Name

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

Position held in the Auspice organisation *

e.g., Manager, Board Member or Fundraising Coordinator.

Please attach a letter from the Auspice organisation confirming that the auspice arrangement is valid and current. *
Attach a file:

Please ensure you label the file correctly, e.g. Group Name- Auspice Letter. The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

Please upload Auspice public liability insurance here *
Attach a file:

Before you upload your file, please name it correctly, e.g. Group Name - Auspice Public Liability Insurance

What is your Auspice incorporation number? *

Incorporated Association or Australian Company Number. If you wish to check the incorporation number please visit https://www.consumer.vic.gov.au/clubs-and-fundraising/incorporated-associations/search-for-an-incorporated-association

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.

As the Auspice organisation does not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application. Download the form from the ATO website.

Please upload completed Statement of Supplier Form: *
Attach a file:

Please ensure you label the file correctly, e.g. Group Name - Auspice Statement of Supplier Form. Max 25mb per file uploaded

Child Safe Standards

* indicates a required field

Child Safe Standards

Macedon Ranges Shire Council is committed to a zero tolerance approach to child abuse, through actively promoting child safety and ensuring compliance with the Victorian Child Safe Standards. All applicants must demonstrate compliance with the Victorian Child Safe Standards and read/understand Council's Child Wellbeing and Safety Policy available here.

Please note: If your organisation is being auspiced for the purpose of this grant, the auspicing organisation will also need to meet the Child Safe Standards.

Reference: CCYP | Child Safe Standards

What type of contact with children or young people will your project have? *
○   Direct contact
○   Incidental contact - the project is not intended for children or young people, however incidental contact may occur.

Direct contact or incidental contact includes face-to-face, physical, written, verbal or electronic contact, whether supervised or not.

Project involves direct contact with children

As your project will engage directly with children as either participants or audience members, you will be required to demonstrate that you are complying with the Child Safe Standards. To do so, please upload a copy of your organisation's **Child Safe Policy** and complete the Child Safe Standards Direct Contact Checklist.

If your organisation does not yet have a Child Safe Policy a template is available here.

If your organisation is being auspiced for the purpose of this grant, you will also need to provide a copy of their Child Safe Policy and/or Child Safe Statement of Commitment.

Please upload your organisations Child Safe Policy. *
Attach a file:

Before uploading the document, please ensure you name it correctly, e.g. Group Name - Child Safe Policy. If your organisation is auspiced for the purpose of this grant, please upload their Child Safe Policy.

Please upload a signed and completed Child Safe Standards Direct contact checklist here *
Attach a file:

Before uploading the document, please ensure you have named it correctly, e.g. Group Name - Child Safe Standards Direct contact checklist. If your organisation is auspiced for the purpose of this grant, please upload their checklist.

Project may involve incidental contact with children

As your project may involve incidental contact with children, you will be required to demonstrate that you are complying with the Child Safe Standards. To do so, please complete, sign and upload the Child Safe Statement of Commitment. Please note: this must be signed by a senior member of your organisation, e.g. President, Treasurer, Secretary.

If your organisation is being auspiced for the purpose of this grant, you will also need to provide a copy of their Child Safe Policy and/or Child Safe Statement of Commitment.

Please upload a copy of your signed Child Safe Statement of Commitment here *
Attach a file:

Before uploading the document, please name it correctly, e.g. Group Name - Child Safe Statement of Commitment. If your organisation is auspiced for the purpose of this grant, please upload their Child Safe Policy or Child Safe Statement of Commitment.

Project Summary

* indicates a required field

Which funding category are you applying for? *
○ Category 1: Community, cultural and environmental projects
○ Category 2: Organisational Support
○ Category 3: Small Community Infrastructure
Category 1 - up to $10,000, Category 2 - up to $5,000, Category 3 - up to $12,000.

Total Amount Requested *

$ [   ]

What is the total financial support you are requesting in this grant application? Category 1 - up to $10,000, Category 2 - up to $5,000, Category 3 - up to $12,000.

For this project, did your organisation submit a request for funding in the Council Budget? *

○ Yes   ○ No

If yes, please note, should your organisation be successfully included in the Council Budget, you will be unable to receive CFS funding for the same project.

Is your project a community event? *
○ Yes   ○ No
A community event maybe an open day, market, exhibition etc.

Please contact the Events and Festivals team

Please contact the Events and Festivals team on 5421 9521 or email eventsandfilming@mrsc.vic.gov.au to determine if your project is more appropriately funded through the Events and Festivals grants program and/or if you will need an Event Permit.

If you are advised that your organisation is eligible for the Events and Festivals program, you may only continue with this application if the funding being requested is for something significantly different to that being requested under the Events and Festivals grant program.

Please note you may be required to submit an application for an event permit.

Further information about event permits and running an event in the Macedon Shire can be found HERE.

Is your planned event eligible for the Events and Festivals Grant program? *
○ Yes - I understand I can still apply for the Community Funding Scheme, as this funding request is for a significantly different project
○ No

Is an event permit required? *
○ Yes   ○ No
If you are unsure, the Events & Festivals Officer will be able to advise you on this - see contact details above.

Summary Information

Project title: *

[   ]

Word count:
Must be no more than 5 words.

Please provide a brief project description of your project. *

Word count:
Must be no more than 30 words.

Detailed project description *

Word count:
Must be no more than 400 words.
Please provide more detail here on what your project is trying to achieve.

Anticipated start date *

Must be a date and no earlier than 1/8/2024.
If unknown, provide your best guess.

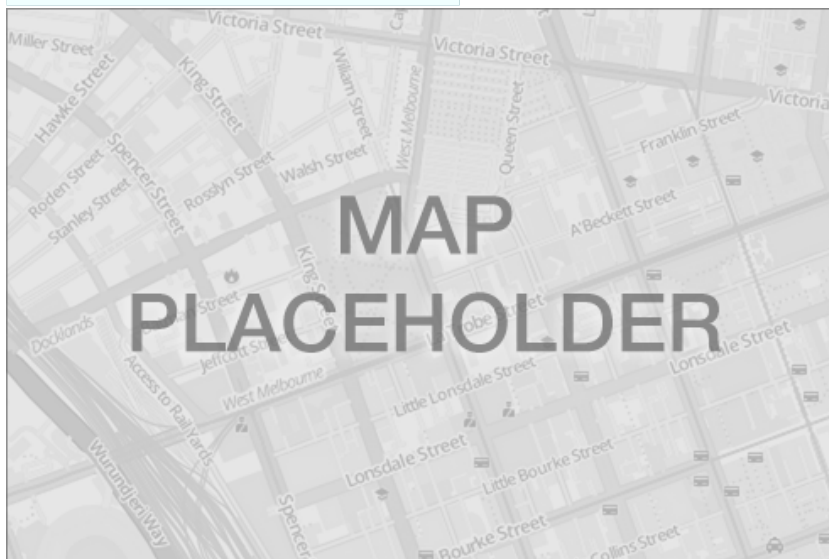**Anticipated end date** *

Must be a date and no later than 30/6/2025.
If unknown, provide your best guess.

Project Location(s)

Please provide your project location. You may provide up to 3 locations. For information on council wards click here.

Project Address *
Address

Project Local Government Area

Which Council Ward is your project located in? *

○ East Ward   ○ South Ward   ○ Other:

○ West Ward   ○ All Wards

Criteria 1: Evidence of Need

* indicates a required field

Which of the following descriptions best describes the need for your project?

☐ Project addresses a need that is not otherwise being met
☐ Project is an innovative/creative idea
☐ This project contributes to community resilience and wellbeing
☐ The need for this project has been supported by evidence based research
☐ Other:

Tick all that apply.

Please explain your choices above, using justifications to support each selection. *

Word count:
Must be no more than 200 words.
.

Does this project have community support? *

○ Yes   ○ No   ○ Don't Know

Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful. Have you consulted the community or conducted any surveys?

Letters of support are best sought from people or organisations outside of your own.

Please use this section to show you have community support from *other* community organisations or members of the community who are not associated with your organisation.

Please upload community letters of support or evidence of community consultation. *

Attach a file:

If you have more than 2 support letters we recommend you scan them all into one document and upload as one file. Please ensure you label the file accurately, e.g. Group Name - Support Letters.

Community Partnerships

Will your project involve partnering with any other community groups? *

○ Yes ○ No

Partnering with other community organisations will increase your score.

Community Partnerships - Detail

Please provide a brief outline of the community partnerships involved in this project. *

Word count:

Must be no more than 100 words.

Criteria 2: Alignment to Council priorities

* indicates a required field

Please refer to the program guidelines for information and links to Council's strategic plans and priorities.

Projects that support reconciliation or celebrate First Nations Peoples and/or supports Council Environmental and Wellbeing priorities will be highly regarded and may contribute to a score higher.

Which of Council's strategic documents does your project align with ? *

☐ Council Plan ☐ Youth Strategy

☐ Municipal Public Health and Wellbeing Plan ☐ Municipal Early Years Plan

☐ Environment Strategy ☐ Positive Ageing Plan

☐ Disability Action Plan ☐ Reconciliation Action Plan

☐ Arts and Culture Strategy ☐ Healthy Heart of Victoria Active Living Census

☐ Heritage Strategy ☐ Other:

At least 1 choice must be selected.

please select all that apply.

Please explain how your project aligns with the strategic document(s) identified above. *

Word count:

Must be no more than 300 words.

Criteria 3: Community Benefit

* indicates a required field

Participation and Beneficiaries

How many people/community members do you expect to directly benefit from this project? *

Must be a number.

How many people do you expect to participate/volunteer on this project? *

Must be a number.

Please indicate the intended impact on community participation. Select all that apply. *

☐ Increase current community participation
☐ Increase participation of specific gender (women, men, non-binary)
☐ Increase participation of people of all abilities
☐ Increase participation of a specific age group
☐ Other:

Please explain how the community will benefit from your project and the impact on participation you have selected above. *

Word count:
Must be no more than 200 words.
You may include people/groups you think will directly and indirectly benefit from the project.

Gender Equity, Accessibility & Inclusion

We want you to show how you have considered gender (e.g. women, non-binary, men) and the accessibility and inclusion of other groups (e.g. different ages, cultures, abilities and LGBTQIA+) in designing your project. For more information on making your project more inclusive click here

If you are targeting a specific audience e.g. running a gender-specific initiative, please tell us why only one gender is being targeted. For more information on applying a gender lens to your work, visit http://www.fundingcentre.com.au/help/gender-lens

Please comment on how you have considered equity, accessibility and inclusion in designing your project. *

Word count:
Must be no more than 200 words.
Please list here actions you have taken to make your project more inclusive. You may also list any policies or activities your group has developed to address equity, accessibility, diversity and inclusion.

Supporting documentation/additional information (if required)
Attach a file:

Please label your file correctly - e.g. Gender Equity Statement - Organisation Name or you may upload your organisations Diversity Policy or Inclusion Policy or a flyer from an event that demonstrates your work in this area.

Universal Design Principles

For more information on Universal Design principles click here.

Has your project considered and incorporated Universal Design principles? *
○ Yes ○ No ○ Don't Know
The aim of universal design is to provide one solution that can accommodate all people. This includes considering the needs of people with a disability, older adults, children and young people, women, men and gender diverse people and culturally diverse communities.

Universal Design Detail

As you selected yes, please provide a brief explanation of how your project has incorporated Universal Design principles. *

Word count:
Must be no more than 100 words.

Criteria 4: Ability to deliver project

* indicates a required field

Overview

This criterion is assessed according to 4 key areas, project planning, risk management, budget and supporting documentation (if required).

Project Planning

Please provide a list of all the tasks involved in the planning, delivery and acquittal of this project. Click here for a sample project plan for category 1 or 3 and here for a sample project plan for category 2. If you need further assistance, contact the grants team.

Task	Start Date (if known)	Finish Date (if known)	Who is responsible?
e.g. planning; major activities; evaluation	Must be a date.	Must be a date.	

Risk Management

Please outline the potential risks that could impact the successful delivery of this project and what strategies you will undertake to mitigate them. *

Word count:
Must be no more than 200 words.

Public Assets and Facilities

Does you project involve making changes to a public facility such as a building or open space including parks and gardens? *
○ Yes   ○ No
Funding may be subject to obtaining permissions and/or permits. If you are unsure, please contact the grants team for further information.

Changes to Public Assets

PERMISSIONS

If you are making changes to a public facility, you will need to seek *in principal* permission from the property owner/landowner, for example Department of Energy, Environment and Climate Action (DEECA ph 136 186) and or Macedon Ranges Shire Council. If your grant application is successful, you will then need to obtain *formal* approval before the project can commence.

PERMITS

If you are making changes to a public facility, you may need a building and/or planning permit. If you need assistance with this, please contact the grants team and they can help direct you to the appropriate Council Officer for further advice.

What permission and/or permits have you sought or obtained? *
☐   Landlord/Owner permission obtained
☐   Permit
☐   NO permits or permissions obtained

Landlord/Owner Permission

Please attached evidence of permission from property owner. *
Attach a file:

Please upload evidence of permission or approval from the land/property owner here and label with Group Name - Property/landowner permission.

Please upload the property lease/license agreement here. *
Attach a file:

Please upload a copy of the relevant lease/license agreement for the property here and label file with Group Name- Property lease/license agreement.

Permits

Please upload any permits you have obtained for this project here. *
Attach a file:

[   ]

Please label each permit file with Group Name - permit type. If you have more than 2 permits, you may need to scan them together and upload as one document.

Permits and/or permission not yet sought

If you haven't yet sought any permits or permissions, please briefly explain why and how you have factored this into your project timeline *

[   ]

Word count:
Must be no more than 50 words.

Supporting documentation small infrastructure projects

Please upload any other documentation to demonstrate your organisations ability to deliver the project eg, photographs, professional reports, drawings, site plan or master plan etc.
Attach a file:

[   ]

Please label all files accurately e.g. Group Name- Site Plan. If your project involves making changes to a public asset, please upload construction/concept plans, site/master plans and professional reports and photographs here.

Project Budget

* indicates a required field

Budget (GST exclusive)

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not. All amounts should be GST exclusive. Please include any cash and/or in-kind contributions from your group. Click here for a sample budget for category 1 or 3 and here for a sample budget for category 2.

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

Income Type	Confirmed Funding?	Income Amount ($)	Notes:
CFS Grant Grant Donations Earned Income Other Income In kind contribution	Yes No Not Applicable	$	

		$	
		Please do not add commas	Add any other detail if needed here.

Expenditure Description	Expenditure Type	Expenditure Amount ($)
		$
		$

Budget Totals

Total Income Amount

$

This number/amount is calculated.
This should include all income for the project.

Total Expenditure Amount

$

This number/amount is calculated.
This should be the total cost for your project, including all expenses.

Income - Expenditure $0.00

This number/amount is calculated.
This figure should equal $0.00. You may need to go back and adjust the income or expenditure is this figure does not balance.

Quotes

Having quotes for all aspects of your project will increase your score in the ability to deliver criteria.

Have you obtained any quotes for this project? *
○ Yes   ○ No

Please attach any quotes you have obtained here *
Attach a file:

Please combine all your quotes to one document. Please ensure to label your file correctly e.g. Group Name - Quotes

Organisational Capacity

Now that we have learnt about your project, we want to find out about your organisation's ability to undertake this work. To demonstrate good governance and effective operational management, we are requesting a copy of your most recent Financial Statement and AGM minutes. Alternatively, you may provide a copy of your most recent Annual Report. This will give us confidence that you can complete the work as described in this application.

Please upload Financial Statement and AGM minutes/Annual report here. *
Attach a file:

Please label your file correctly - e.g.Group Name - Financial Statement/AGM minutes.

Feedback

*indicates a required field

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.

Please indicate how you found the online application process: *

○ Very easy   ○ Easy   ○ Neutral   ○ Difficult   ○ Very Difficult

Did you attend a grants Q&A information session before you applied? *

○ Yes   ○ No

Please provide us with any suggestions and feedback you'd like us to be aware of.

The focus of you feedback could include, application form, process of applying, contact with Council Officers and support provided - or anything you'd like to see included next round.

Grant Q&A Session Feedback

If yes, was the grants Q&A session useful? *

○ Yes   ○ No   ○ Other: