Community Pathway Application Form
Form Preview

Important Information

* indicates a required field

Getting started

Read the Wyndham City Community Strengthening Grants Program Guidelines

- If your project is an event or festival, please also read Wyndham City's Event Planning Guide

Review the Wyndham City Council Plan 2025-2029, which includes the municipal public health and wellbeing plan and/or strategies relevant to your project

- It's important to align your project with the Wyndham priorities and strategies that can be found on Council's website
- It is recommended that you speak with a Council Officer connected with your project's theme before submitting an application.
- If you need help identifying an appropriate Council Officer, please contact Wyndham City's Customer Service or Grants Team on 8734 1373.

Collect the required supporting documents

Supporting documents you may need to upload include:

- Sports: Selection notification into sporting competition, valid Health Care Card, letters of support.
    - Check the sporting competition is endorsed by the recognised sporting association/organisation as listed by: • Sport and Recreation Victoria • Australian Sporting Commission
- Community Leadership: history of volunteering participation and civic engagement / Evidence of the opportunity's relevance to your work in the community.

Please note:

- Recipients are only eligible to receive one Community Pathway Grant per financial year
- Participants under the age of 18 will need to have an applicant over 18 years of age apply on their behalf.
- Sports: Up to $1,000 for Wyndham resident competing overseas / Up to $500 for Wyndham residents competing in Australia.
- Community Leadership - Up to $500 for Wyndham residents attending eligible leadership development opportunities.

Support

If you need support to navigate and complete this form, please refer to the SmartyGrants applicant help guide

If you need support understanding questions in this form, please contact the Wyndham City Grants Team by email funding@wyndham.vic.gov.au or phone 1300 023 411.

When contacting anyone regarding your application form please refer to the application number below:

Community Pathway Application Form
Form Preview

Application Number

This field is read only.
The identification number or code for this submission.

Have you read the Wyndham City Community Pathway Grants Guidelines? *
- ○ Yes
- ○ No

Privacy Collection Statement

Your personal information is being collected by Wyndham City Council for the purpose of administering Community Grants Funding Applications. Your information will be stored in Council's Customer Database and used to identify you when communicating with Council and for delivery of services and information. By registering your details, you consent to the collection, use and disclosure of your personal information as stated in the Terms and Conditions. Your personal information will be handled in accordance with the Privacy and Data Protection Act 2014 (Vic). For further information about how your personal information is handled, visit Council's Privacy Policy

Applicant Details

* indicates a required field

Applicant details

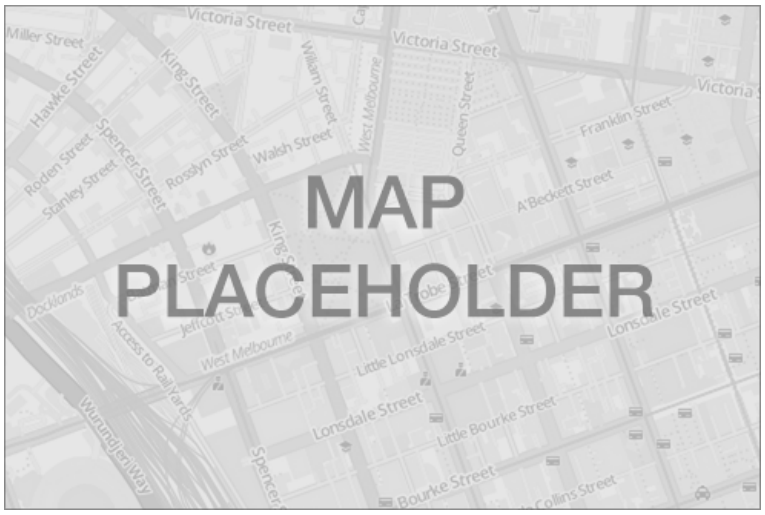
This section relates to the person who has been selected to participate in eligible sporting competitions and community leadership opportunities.

If the individual applicant is under 18 years old we will require the authorisation of the parent/guardian prior to submitting your application. The authorisation form can be located at the end of the application form.

Applicant Recipient *
First Name Last Name

This is the name of the person who will be attending the activity

Applicant Primary Address *
Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Must be an address within Wyndham Local Government zone

Applicant Postal Address *
Address

Applicant Primary Phone Number *

Must be an Australian phone number.
If using an (03) number, please enter the number and click save before moving on with the form.

Applicant Primary Email *

Must be an email address.

Which Community Pathway Grant are you applying for? *
- ○ Sports
- ○ Community Leadership
- ○ Carer support of a Wyndham resident living with a disability

Select what best describes the activity you are going to do?

Age requirements

Are you applying for a recipient who is under 18 years of age? *
○ Yes ○ No
Hint: If you are a parent/guardian or auspice group on behalf of the recipient, you must provide a copy of proof of birth e.g birth certificate, passport or letter from the school.

Attach proof of residency

To be eligible for funding the applicant must provide proof that they are a resident of Wyndham.

- Utility bill
- Rates notice
- Health care card
- Letter from school or sporting body confirming residency

One item of proof required

Upload residency documents *
Attach a file:

Financial Need

Applicants are required to demonstrate financial need. Priority will be provided to applicants who hold a valid Health Care Card.

If the applicant does not have a valid Health Care Card, we will accept a valid Concession card or referral from community partner/local organisation.

Please tell us how this grant will support you/your family financially? *

Must be no more than 120 words.
As there is a limited pool of funds for the Funding Stream, meeting eligibility criteria does not guarantee funding. The process is competitive and applications are weighted under the published Assessment Criteria to ensure a transparent process of selection.

Financial support documents *
Attach a file:

Priority funding will be provided to applicants in possession of a Health Care Card

Under 18 Community Pathways Scholarship

Date of Birth *

Must be a date.
You must provide a copy of proof of age e.g birth certificate, passport, student ID or letter from the school.

Upload proof of age document/s *
Attach a file:

Over 18 Community Pathways Scholarship

Date of Birth *

Must be a date.

Carer Details

Name of person living with disability *
Organisation Name

Carer Name *
First Name Last Name

Contact Position

Primary Address *
Address

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

Primary Phone Number *

Must be an Australian phone number.

Primary Email *

Must be an email address.

Evidence of resident living with a disability *
Attach a file:

Examples - Medical report completed by the care recipient's treating doctor, specialist or allied health professional, statutory declaration stating you are the primary carer, Foster care/kinship documentation

Activity summary

* indicates a required field

Activity Title *

Word count:
Must be no more than 30 words.

Must include name of competition and age group (if applicable)

Activity Summary *

Word count:
Must be no more than 100 words.
In 100 words or less, briefly outline the activity (competition, training, event, etc.) and its importance to you / the young person subject of the application.

Start Date *

Must be a date and no earlier than 6/11/2026.

End Date *

Must be a date and no later than 7/5/2027.
End date must be within 6 months from the start date

Where will the activity/competition be held? *

Include as many details as possible

Community Leadership

Please provide information outlining recent community contributions from the area you have been volunteering in. *

Word count:
Must be no more than 200 words.

Demonstrated history of volunteering participation and civic engagement *
Attach a file:

You may also choose to attach additional documentation which will further support your application.

Evidence of the opportunity's relevance to their work in the community. *
Attach a file:

Evidence of the opportunities relevance to the community work

Please attach evidence of the cost of the course or activity you are seeking funding for
Attach a file:

Upload supporting documentation that confirms the course fees or participation costs, such as:Course brochure or flyer, Official quote or fee schedule, Direct link to the course or activity webpage

Please attach information outlining the course guidelines and details of the organisation delivering the course
Attach a file:

Upload documentation that provides information about the course and provider, such as: Course flyer or information pack, Course guidelines or eligibility requirements, Details of the training or education provider, Direct link to the organisation's website and course webpage. These documents will help Council assess the suitability and eligibility of the proposed activity.

Sports

Applications must be accompanied by a letter and/or other official documentation from the State or National Association or governing body of the sport/recreation competition concerned. The documentation must confirm that the competition is of National or International standard and must confirm selection/entry into the competition.

Have you / the under 18yo applicant been selected and registered to compete in the nominated championship/competition as outlined above? *
- ○ Yes
- ○ No

Is the competition a recognised National or International sport? *
- ○ Yes
- ○ No

Has the competition/event been endorsed by the recognised Sporting Association/ Organisation? *
- ○ Yes
- ○ No

You must provide support evidence (letter or email) confirming endorsement

Name of Competition *

State/National Association Name *
Organisation Name

Association Website

Must be a URL.

Evidence of Competition Entry/Registration *
Attach a file:

A letter or other official documentation from the sporting/recreational activity body with the recipients name on it confirming selection/entry into the competition.

Please upload other relevant supporting documents *
Attach a file:

Upload costs relating to competition/event i.e accommodation, flight details, competition fees, letter/ email from Sporting Association/Organisation endorsing event/competition

Budget Expenditure

One application per financial year.

The amounts in this table will be calculated below as total amount requested.

- Applicants participating within Australia are eligible for a maximum of $500
- Applicants participating overseas are eligible for a maximum of $1,000

What can be funded:

- Course or program fees
- Uniform or essential equipment
- Training, leadership or development programs
- Competition or participation costs
- Travel
- Accommodation

What will not be funded:

- Fuel
- Items funded by another source
- Item that provide a financial benefit or profit to individuals or businesses
- Promote the business or self-interest of an applicant
- Activity/program that has already started or finished
- Expenses paid before application submission or funding outcome notification

If your application is successful, you may be asked to provide supporting documentation (such as quotes and calculations) for budget items.

Expenditure description	**Expenditure amount (budgeted)**
	$
	$
	$
	$
	Must be a dollar amount.

Total Amount Requested *

$

This number/amount is calculated.
If this amount is more than $1,000 the application form cannot be submitted.

Payments

Expenses paid before application submission or funding outcome notification will not be funded. You must disclosure whether payments have been made towards a budget item you are seeking funding for. This item will be excluded from assessment and only items that have not been paid for will be assessed.

Have you already paid for costs associated with budget? e.g registration fees *
- ○ Yes
- ○ No

Please list below what budget items have been paid costs have been paid and the amounts?

Bank Account *
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.
Bank accounts details must be in the name of the person completing the form

Declaration

* indicates a required field

This declaration must be made by the Individual Applicant, Parent/Guardian, Authorised Representative of the applicant, auspice organisation/group or authorised school representative.

By submitting this form, you declare that:

1. You are the Applicant Recipient, Parent/Guardian or authorised representative of the Applicant Recipient, auspice organisation/group listed in this application.
2. You understand there is no guarantee the Scholarship will be provided. The application will be assessed against criteria and the funding decision of Council is final.
3. You understand that if scholarship is awarded, the Applicant Recipient or Parent/ Guardian, Authorised Representative of the Applicant Recipient or auspice organisation/ group will be responsible for ensuring that funds are appropriately distributed, that all financial records are kept and all requirements of the grant are met.
4. All information provided in this application is true and correct to the best of your knowledge at the time of completing the application.
5. You have read and understand all the requirements outlined in the Community Grants Program Guidelines and this application form
6. You understand that the Applicant Recipient or Parent/Guardian, Authorised Representative of the Applicant Recipient or auspice organisation/group will not be

eligible for a Council Grant or Scholarship until all conditions are met for any pre-existing Council grant or Scholarship.

7. You understand that Council will not be responsible at any time for any liability incurred or entered into by the Applicant Recipient, Parent/Guardian, Authorised Representative of the Applicant Recipient, or auspice organisation/group as a result of or arising out of this application process or any subsequent scholarships, grants or projects.
8. You understand that if this application is successful, the Applicant Recipient or Parent/Guardian, Authorised Representative of the Applicant Recipient, or auspice organisation/group or authorised school representative will be required to enter into a funding agreement with Council and comply with its terms.

- You are Parent/guardian of the Applicant Recipient or Authorised Representative for the Auspice Organisation in this funding application.
- You understand that if funding is awarded you will be the individual responsible for ensuring funds are appropriately distributed, all financial records are kept and that all requirements of the grant are met.

Applicant Authorised Representative *

First Name Last Name

Relationship to the Applicant

Parent/guardian or the Authorised Representative Primary Address *

Address

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

Parent/guardian or the Authorised Representative Postal Address *

Address

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

Parent/guardian or the Authorised Representative Representative Primary Phone Number *

Must be an Australian phone number.

Applicant Authorised Representative Primary Email *

Must be an email address.

Application feedback

Please indicate how you found the online form

○ Very Easy ○ Easy ○ Difficult ○ Very Difficult

Overall, how many minutes did it take you to complete this form?

Must be a number.

Please provide any improvement suggestions we should consider for Wyndham City's Community Grants Program or application forms?

How did you hear about Wyndham City's Community Grants Program?

☐ Wyndham City Council website
☐ Social media
☐ Newspaper
☐ Council e-newsletter or email
☐ Flyer or poster
☐ Word of mouth