

# 2024-2025 Small Grant Application Form (Incorp-NFP)

## Form Preview

### Important Information

#### Before You Start

##### **Have you read the Community Grants Program Guidelines?**

- Read the [Guidelines](#) to ensure all eligibility criteria are met.

##### **Have you reviewed the Wyndham 2040 Community Vision and/or Strategies relevant to your project?**

- It is important to align your project with the Wyndham 2040 Community Vision, Council Plan, Municipal Public Health and Wellbeing Plan and/or one of Wyndham City's Strategies. You can find them [here](#).
- It is strongly recommended that you speak with a Council Officer connected with your projects themes before submitting an application. If you need assistance locating an appropriate Council Officer, contact Customer Service or the Grants Team.

##### **Are you a Community Group that is not incorporated but needs to apply for a grant to fund a project idea?**

- You may be entitled to be auspiced. This would be a not-for-profit organisation who acts as a guarantor for your group.
- To find out about an Auspice visit the [Community Resources & Support](#) webpage.

##### **Have you gathered all supporting documents to attach to this application?**

- Supporting documents may be required for this application, make sure you have them attached before pressing the submit button
- Examples of supporting documents: Project Plan; Letter of Support from Auspice Organisation; Letters of Support; Certificate of Insurance (mandatory); Certificate of Incorporation(mandatory); etc

##### **How to navigate and complete this grant application form in SmartyGrants:**

- See the [Applicant Help Guide](#) for application assistance.

##### **Have you already submitted an application for this Grant Round?**

- Please note only one application per grant round, per financial year is permitted (Medium/Large Grants).
- Small Grants - Please note only one application per month, maximum of three applications per financial year is permitted (case by case basis assessed based on identified needs of the community).

##### **Are you having trouble completing the application?**

- If you need support with your grant application Wyndham City's Grants Team is here to help. Please call 1300 023 411 or email [funding@wyndham.vic.gov.au](mailto:funding@wyndham.vic.gov.au)

##### **How do you find out about other Wyndham Grants Opportunities?**

- Sign up to Wyndham City's Grants and Volunteers eNewsletter [here](#)

**If funded you will be required to complete a Final Report at the end of your project and financially acquit the funding received. You must retain and present all receipts and paid invoices must be accompanied by a receipt or corresponding bank statement evidence.**

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**HINT: Please ensure that you save this application regularly to avoid losing data.**

### Applicant Details

\* indicates a required field

#### Applicant Organisational Name

**Organisation Name \***

Organisation Name

**Project Title \***

Provide a name for your project/program/initiative. Your title should be short but descriptive, No more than 15 words.

**Total Amount Requested \***

\$

Must be a dollar amount and no more than 2000.

What is the total financial support you are requesting in this application? Must be a whole dollar amount (no cents), no more than \$2,000 for incorporated/not-for-profit organisations or auspiced groups.

**Applicant Primary Grant Contact \***

Title	First Name	Last Name
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<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Applicant Primary Grant Contact Position \***

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

**Best Contact Number \***

Please make sure you are available in this contact number during business hours

**Primary Contacts Email address \***

The email address Council will use to correspond with you about this grant.

**Tell us about your organisation? \***

Word count:

Must be at least 30 words.

What does your organisation do and what is it's purpose.

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**Will your group be auspiced by another organisation? \***

☐ Yes

☐ No

### Organisation Information

The organisation listed in this section is the applicant organisation, and must be a non-profit entity, such as an incorporated association, a registered charity and/or a non-profit organisation by constitution. If your application is successful, this organisation will be responsible for ensuring all requirements of the grant are met.

**Incorporation Number (if applicable)**

**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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

**Organisation Address \***

Address

  

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

**Organisation Postal Address**

Address

  

Hint: where your correspondence will be forwarded

**Organisation Phone Number \***

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### Organisation Email \*

Must be an email address.

Hint: If your organisation has an email address, please supply for future correspondence

### Organisation Website

Must be a URL.

## Auspice Organisation

The organisation listed in this section is the Auspice Organisation, and must be a non-profit entity, such as an incorporated association, registered charity and/or non-profit by constitution. If your application is successful, the auspice will be responsible for ensuring all requirements of the grant are met.

### Providing Evidence

A signed Auspice Agreement/Letter of Support is required to be attached to this application to be eligible for funding.

**NOTE: If you do not have an auspice for your funding application, you will not be able to complete this section of the form.**

### Auspice Organisation \*

Organisation Name

### 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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

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Must be an ABN. Must be an ABN number not entity name.

### Auspice Contact \*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Auspice Contact Position \*

### Auspice Organisation Address \*

Address

  

### Auspice Postal Address \*

Address

  

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

### Auspice Phone Number \*

Must be an Australian phone number.

### Auspice Primary Email \*

The email address Council will use to correspond with you about this grant.

### Auspice Primary Website

Must be a URL.

### Auspice Agreement \*

Attach a file:

Please upload evidence of your auspice agreement/support.

## Applicant Summary

\* indicates a required field

### Overview

#### What best describes the activity you are seeking funding for? \*

☐ Community Event/Festival

☐ Project/Program

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

### Project Summary \*

Word count:

Must be no more than 50 words.

Hint: what are you trying to achieve and how? This is the first thing an application assessor reads when assessing all funding applications - be descriptive

**Start Date - cannot be in the same month, or the month after, the application is submitted.**

Must be a date and between 6/12/2024 and 31/12/2025.

Earliest Start Date Explained: If you apply anytime in July it cannot be for an activity starting in July or August, and so on...

### End Date \*

Must be a date and between 1/8/2024 and 31/12/2026.

### Have you discussed your project with a Council Officer? \*

☐ Yes

☐ No

It is recommended that you discuss your project with a Council Officer related to your project's area of focus, especially for a grant application above \$1,000. I.E. If you are seeking a grant for a project focused on young people, it is recommended that you speak with a member of the Youth Services Team.

Wyndham Council Officer

**If yes, please provide the name of the Council Officer (\*NOT a Councillor).**

If you have not discussed your application with a Council Officer you can call 1300 023 411 and ask to speak with an officer from an area with interest/relevance to your project or speak with a member of the Community Strengthening Team or the Grants Team to help find an appropriate officer to liaise with. \*Tip: Applicants who have engaged with a staff member about their project ideas are often more likely to be funded as they tend to be more informed about a project's strategic alignment to Council's priorities.

### Project/Event Benefits

**Extent to which the project activities are likely to contribute towards one or more aims of the [Wyndham 2040 Community Vision](#), the Council Plan, Municipal Public Health and Wellbeing Plan and other [Wyndham City Strategies](#).**

**Please choose the top 5 community benefits (up to a maximum of 5) that your project or event will contribute towards.**

**This project/event will contribute towards the following aims of the Wyndham 2040 Community Vision, Council Plan and/or Municipal Public Health and Wellbeing Plan: \***

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- ☐ A welcoming, diverse and inclusive community
- ☐ A community with increased support
- ☐ A community that is more actively involved in the local community
- ☐ A place for creativity, arts and cultural connection
- ☐ Safe and family friendly
- ☐ Socially connected and less socially isolated
- ☐ A healthier and more physically active community
- ☐ Supportive of vulnerable community members
- ☐ Better able to manage stress and mental health issues
- ☐ More environmentally aware and applying more sustainable practices
- ☐ A place for learning and development for community members
- ☐ A place where people feel part of the community
- ☐ A community more involved in volunteering locally
- ☐ A community involved in organised community groups or sports/recreation clubs
- ☐ A cohesive and socially connected community able to ask for help if needed
- ☐ People have access to formal and informal learning opportunities
- ☐ People learn to and can make healthy food choices and have food security locally
- ☐ Accessible services that cater for all ages and life stages
- ☐ Support for problem gamblers
- ☐ Support for smokers, e-cigarette users and other addictions
- ☐ We enjoy formal and substantive equality
- ☐ A zero-carbon community consuming locally and responsibly
- ☐ Meeting our community's housing needs
- ☐ To be safe at home
- ☐ Other
- No more than 5 choices may be selected.

**Please tell us how your project/event will support the benefits you have ticked above and any other elements of the Wyndham 2040 Community Vision, Council Plan, Community Grants Program Objectives, and/or other Wyndham City Strategies or Plans that your project relates to: \***

Word count:

Must be no more than 200 words.

Hint: Please refer to the Wyndham 2040 Vision, Council Plan and other Wyndham City Strategies via the link provided above.

### Activity Type

- ☐ Place Based Event
- ☐ Cultural Event/Festival
- ☐ Arts Development
- ☐ Community Leadership
- ☐ Mentoring/Life Skills
- ☐ Community Support & Human Wellbeing Services
- ☐ Health & Recreation
- ☐ Sport & Employment Education
- ☐ Environment
- ☐ Organisational Development
- ☐ Other

### General Target Groups

- ☐ All Community
- ☐ CALD Communities
- ☐ Early Years (0 - 7yo)
- ☐ Middle Years/ Youth (8 - 25yo)
- ☐ Seniors (60+)
- ☐ Aboriginal/ Torres Strait Islanders
- ☐ Disability
- ☐ Gender Specific
- ☐ Other

Hint: Maximum groups ticked is three

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### Priority Target Groups

☐ Young people ☐ Older people ☐ Women ☐ First Nations people ☐ Homeless people ☐ Multicultural communities ☐ People living alone ☐ People on low incomes ☐ People with low educational attainment ☐ Women and their children escaping family violence ☐ People with a long-term health condition or disability ☐ People experiencing financial stress ☐ Unemployed people

### Project Information

\* indicates a required field

#### What are the project activities you are seeking funding for? \*

Word count:

Must be no more than 300 words.

#### What location(s) will your project take place in? \*

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Cocoroc          | <input type="checkbox"/> Mambourin      | <input type="checkbox"/> Truganina        |
| <input type="checkbox"/> Eynesbury        | <input type="checkbox"/> Manor Lakes    | <input type="checkbox"/> Werribee         |
| <input type="checkbox"/> Hoppers Crossing | <input type="checkbox"/> Mount Cottrell | <input type="checkbox"/> Werribee South   |
| <input type="checkbox"/> Laverton         | <input type="checkbox"/> Point Cook     | <input type="checkbox"/> Williams Landing |
| <input type="checkbox"/> Laverton North   | <input type="checkbox"/> Quandong       | <input type="checkbox"/> Wyndham Harbour  |
| <input type="checkbox"/> Little River     | <input type="checkbox"/> Tarneit        | <input type="checkbox"/> Wyndham Vale     |

At least 1 choice must be selected.

Select all that apply.

#### What venue/location(s) will your project be delivered from? \*

#### Do you have a venue booking? \*

☐ Yes ☐ No ☐ Not Applicable

Proof of booking may be required prior to the awarding of funding.

#### What is the estimated number of people that will be attending or participating in your event/project? \*

Must be a number.

#### How many of the people that will be attending or participating in your event/project will be Wyndham residents? \*

Must be a number.

#### How many volunteers are involved in the planning and delivery of your project? \*

Must be a number.



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**In total, how many volunteer or in-kind staff hours will be required to deliver your project? (This must match your budget)**

Must be a number.

**Will the project/event:**

**Increase the self-sufficiency of your group/organisations? \***

☐ Yes ☐ No ☐ Not sure

**Reduce environmental impact and/or provide energy, water and waste efficiencies? \***

☐ Yes ☐ No ☐ Not sure

**Build skills, capacity and governance of your group/organisation? \***

☐ Yes ☐ No ☐ Not sure

**Involve local collaborations and partnerships? \***

☐ Yes ☐ No ☐ Not sure

**Activate places and spaces in Wyndham? \***

☐ Yes ☐ No ☐ Not sure

**If 'Yes' to any of the above, please explain why / how. \***

Word count:

Must be no more than 200 words.

**Project/Event Inclusions**

**Within your project are you planning to:**

**Respectfully acknowledge the Traditional Owners of lands on which Wyndham City is being built, including budgeting for cultural performances and/or education, where appropriate? \***

☐ Yes ☐ No ☐ Not sure

**Purchase the majority of goods and services from local Wyndham businesses, from businesses that are social enterprises and/or Victorian Aboriginal and/or Torres Strait Islander businesses? \***

☐ Yes ☐ No ☐ Not sure

**Apply environmental sustainability practices to your project or event (avoid single use plastic products, use recyclables etc.)? \***

☐ Yes ☐ No ☐ Not sure

**Provide access and inclusion of people with a disability? \***

☐ Yes ☐ No ☐ Not sure

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**If 'Yes' to any of the above, please explain how you intend to achieve this. \***

Word count:

Must be no more than 200 words.

Please provide details of what you are planning.

## Community Events and Festivals Information

Please read Wyndham City's [Event Planning Guide](#).

**Have you read and do you agree to comply with Wyndham City's Event Planning Guide?**

☐ Yes

☐ No

☐

Hint: You may not receive funding if your event is not compliant with the Event Planning Guide.

**What planning have you undertaken, and are committed to, in order to reduce the environmental impact of your event or festival? \***

Word count:

Must be no more than 300 words.

Examples include litter management, reuse/ recycling, use of sustainable packaging, environmentally friendly practices etc.

## Project Delivery

**How will you let the community know about your project and, if funded, how will you acknowledge Wyndham City Council's support?? \***

Word count:

Must be no more than 200 words.

Will you use social media, flyers, posters, advertisements etc.? We recommend including your project or event on Wyndham City's 'What's On' page.

**What evidence do you have to support the need for your project within Wyndham? \***

Include the specific issue or need you want to address (200 words recommended)

**Due to COVID and other potential viruses in the community, there may be actions, requests or advice by the State Government at the time of your planned activity. If this occurs, how do you intend to address this? \***

Word count:

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Must be no more than 200 words.

Hint: HOW will you monitor State Government regulations and advice related to COVID or any other community health warnings? WHAT measures do you plan to undertake to ensure compliance with State Government regulations or advice? WHO will and HOW will you keep project organisers, volunteers and participants safe?

**Who is involved in the planning and delivery of the project? Please provide names of the groups, organisations, or businesses. \***

Must be no more than 250 words Hint: What activities do you plan to undertake, for example describe what you are going to do, number of workshops, meetings you are holding. How many people will be attending your activity? Demonstrate that your project is well planned.

## Project Plan

You are welcome to use your own version or utilise the template provided at the link below.

Please do not copy and paste information from your application into the project plan if you intend on attaching the project plan to this application. The Project Plan is to assist you with planning and, if needed, to enable you to provide more precise information for assessment in relation to planning beyond the responses and word limits within the application. \*TIP: Applications with a project plan that include all elements of the planning of a project tend to score higher in assessment resulting in them being more likely to secure funding above those that don't.

Click here to access the [Community Support & Resources](#) webpage, which contains a Project Plan template.

**Please upload a project plan for your proposed project/event.**

Attach a file:

## Project Funding

**Have you secured funding from another organisation(s) for your project? \***

☐ Yes ☐ No

Hint: Wyndham City Council encourages organisations to seek funding from other sources. If you have received funding from another source this can be included as an applicant contribution in your budget.

## Confirmation of Funding

**If yes, who from and for how much?**

## Previous Wyndham Funding Received

**Have you received a grant or been offered sponsorship from Wyndham City in the past 3 years? \***

☐ Yes ☐ No

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## Previous Wyndham Funding

If you answered Yes to the above question, please tell us what grants you have received (include grant numbers).

## Financial Sustainability Plan

Please upload a Financial Sustainability Plan. You must be able to explain what have you done to becoming less dependent on grant funding? \*

Attach a file:

It is advisable to include a financial sustainability plan (if relevant). It is mandatory to include a sustainability plan if you have received previous funding for this project/event.

## Budget Income

When completing your project budget remember to be realistic in estimating costs and include all in-kind and financial contributions toward the project. Volunteer labour is valued at \$45 per hour or at the standard hourly rate for the services of a certified professional.

You are required insert in the income and expenditure columns in the table below. It is important that the income and expenditure columns both balance.

Your budget **MUST** balance (Total income = Total expenditure).

Income Source	Income Type	Income Amount	Confirmed Funding?	Notes/ Comments
		\$		
		\$		
		\$		
		\$		
		\$		
		Must be a dollar amount. Must be a dollar amount.		

## Budget Expenditure

Where necessary, please comment on how you have estimated budget items. If your application is successful, you may be asked to provide supporting documentation (such as quotes and calculations) for budget items.

Expense Description	Expense Type	Expenditure Amount	Note/Comment	Grant Use
		\$		

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		\$		
		Must be a dollar amount. Must be a dollar amount.		

### Budget Totals

#### Total Income Amount

\$

This number/amount is calculated.

#### Total Expenditure Amount

\$

This number/amount is calculated.

#### Income - Expenditure = \*

\$

This number/amount is calculated.  
Should be \$0.00

### Declaration

\* indicates a required field

This declaration must be made by the applicant or authorised representative of the applicant or auspice organisation/group.

#### General

- 1.I declare that I am the Authorised Representative for the applicant or auspice organisation in this funding application.
- 2.I understand that there is no guarantee that funding will be provided. The application will be assessed against the criteria by an assessment panel and the funding decision of Council is final.
- 3.I understand that if funding is awarded, the applicant/auspice organisation will be responsible for ensuring that funds are appropriately distributed, that all financial records are kept and that all requirements of the grant are met.
- 4.I declare that all information provided in this application is true and correct to the best of my knowledge at the time of completing the application.
- 5.I have read and understand all the requirements outlined in the Community Grants Program Guidelines.
- 6.I understand that the applicant/auspice organisation will not be eligible for a Community Grant until all conditions are met for any pre-existing Council grant.
- 7.I understand that Council employees and Councillors will not be responsible at any time for any liability incurred or entered into by the applicant or auspice as a result of or arising out of this application process or any subsequent grants or projects.
- 8.I understand that if this application is successful, the applicant/auspice organisation will be required to enter into a funding agreement with Council and comply with its terms.

#### Privacy

I understand that:

- Wyndham City Council will use any information provided in this application for the purpose of assessing, administering and monitoring any applications submitted by the Applicant and for remaining in contact with the Applicant
- Personal information is only accessed by persons authorised to do so
- Wyndham City Council may publish the applicant or auspice's name and details about the project on its website or in promoting the grants program.

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### Certification and acknowledgement

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

**I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if this application is approved, we will be required to accept the terms and conditions of the grant as outlined in the funding agreement.**

**I understand that we are required to keep and submit (with the Final Report) all receipts and PAID invoices (with receipts) related to expenditure for all project/event costs and that we will have to pay back any costs without accepted evidence of expenditure.**

**I understand that I am applying for this funding with the approval of those in my organisation or group authorised to give such approval.**

**By selecting the YES box you are agreeing to this declaration \***

☐ Yes

**Name of authorised representative person agreeing to the declaration \***

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Authorised representative position \***

**Contact phone number \***

**Contact Email \***

Please list the names of your Board, Committee Members or Directors

**Chairperson (or equivalent/other: include title) \***

**Secretary (or equivalent/other: include title) \***

**Treasurer (or equivalent/other: include title) \***

**Committee Member (or other: include title)**

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### Committee Member (or other: include title)

If any of these roles are currently vacant, please provide a note about this in the response box and an explanation about how you are planning to recruit for the vacant role(s). If you need support to recruit one of these roles, please contact the grants team who may be able to support you with recruitment ideas, possible options and training, if required.

### Authorised Representative of Auspice

If your application is successful, the auspice organisation must then enter into an agreement with Council and take responsibility for managing the grant funding.

The auspice will be held accountable for the expenditure of the grant, will need to meet all eligibility criteria, and may provide public liability insurance coverage for the project.

**I certify that to the best of my knowledge the statements made within this application are true and correct. 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 funding agreement.**

**I understand that the applicant organisation is required to keep and submit (with the Final Report) all receipts and PAID invoices related to expenditure for all project/event costs and that costs without accepted evidence of expenditure may need to be repaid to the funder.**

### Auspice contact representative person agreeing to the declaration \*

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

### Auspice Contact Position \*

### Auspice Contact Primary Address \*

Address

<input type="text"/>
<input type="text"/>

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

### Auspice Contact Primary Phone Number \*

### Auspice Contact Primary Email \*

## Supporting Documentation

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\* indicates a required field

The following documents are required to be submitted with your application:

- A copy of your (and/or your auspice's if applicable) incorporation certificate or other evidence of the organisations entity status;
- A copy of your public liability insurance certificate of currency; and
- Other supporting material you would like to share

### Public Liability Insurance Certificate \*

Attach a file:

All applications must attach a current, valid public liability insurance certificate (this can be from auspice group if applying with an auspicer) or letter from a venue covering public liability insurance.

### Certificate of Incorporation \*

Attach a file:

Hint: And/or other evidence of not-for-profit status.

### Other Supporting Documents

Attach a file:

Hint: Letters of Partnership, In-kind Support, etc. can be uploaded here.

### How did you hear about the Community Grants Program? \*

- ☐ Wyndham City website
- ☐ eNewsletter
- ☐ Social media
- ☐ Council email
- ☐ Flyer/Poster
- ☐ Newspaper
- ☐ Word of mouth
- ☐ Other

Please specify if other:

## Applicant Feedback

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? \*

Hint: Estimate in minutes i.e. 1 hour = 60 minutes



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

**Please tell us any ideas you have as to how we might be able to improve or change the Community Grants Program in the future to better support and cater to the needs of the Wyndham community.**