#### Introduction

\* indicates a required field

All applicants must read the Guidelines and Assessment Criteria form.

After reading the Guidelines & Assessment Criteria, and prior to completing the application form please contact the **Grants Officer 1300 366 244** to seek feedback and assistance.

All eligible applicants should address the following weighted assessment criteria in their applications - <u>sample answers for grant applications is available to assist with writing your application.</u>

Application scoring breakdown: Planning and Capacity 45% Community Benefits 45% Contribution 10%

\*\* Please note your event or project will be referred to as 'activity' in the Assessment Criteria and Guidelines, Application Form, Funding Agreement and Acquittal Report.

ave read and und Yes	derstood the funding gu	idelines. *
ave contacted th Yes	e Grants Officer - phone	e: 1300 366 244 *

The application form will provide more detail, however to help with preparation, here is a list of documents that is required for your application to be accepted for a Wellington Shire Council grant: - current Public Liability Insurance Certificate - You are required to provide current insurance cover to support your activity. Event organisers please be aware that the event activity (i.e. market, festival, etc) MUST be listed under the business activity section of the Certificate of Currency. - All activities, if applicable, Landowner permission or consent must be supplied. - Additional planning and building permits may be required; call Planning Department 1300 366 244. - All events please call the Event Coordinator 1300 366 244. - Items over \$1,000 will require a quote to be attached in the expenditure table of the activity budget

#### Public Events in Victoria

Public events in Victoria can take place under COVIDSafe settings, please access information in website link below: https://www.coronavirus.vic.gov.au/public-events

#### Contact Details

\* indicates a required field

Conflict of Interest Declaration

planning/delivery of the project/program/event have a relationship with a council staff member and/or Councilor?
<ul> <li>Yes</li> <li>No</li> <li>This does not exclude you from applying</li> </ul>
This does not exclude you from applying
You have answered yes to above question - please provide details
Organisation and Applicant Details
Applicant Organisation: * Organisation Name
Applicant Organisation Website
Must be a URL.
Applicant's name * First Name Last Name
Last Name Last Name
Applicant's Organisation position: *
Applicant email *
All Correspondence will be sent to this email address
Applicant contact phone number
Must be an Australian phone number.
Postal address Address
Address .
Does your organisation have an ABN? *  O Yes  O No
Is your organisation incorporated? *
○ Yes ○ No

Is your organisation is a centralised entit affiliated sub-groups An organisation that maintaining separat   Yes	ty that oversees and s, typically sharing a t consolidates admin	l coordinates the act a common purpose, a distrative duties and	tivities of multiple mission, or interest. expenses while still
Applicant ABN *			
The ABN provided will check that you have er			Click Lookup above to
Information from the Aus	stralian Business Register	•	
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (G	ST)		
DGR Endorsed			
ATO Charity Type	More informa	ation_	
ACNC Registration			
Tax Concessions			
Main business location			
Must be an ABN.			
Applicant organisati	on incorporation nu	mber	
Auspice Details			
	n auspice organisation	n. The auspice will rece	<b>N</b> you will be required to eive the grant funding on
<b>Auspice Organisatio</b> Organisation Name	n *		
J			
Auspice Project Conf	tact * Last Name		

**Auspice Primary Phone Number \*** 

Must be an Australian phone numbe	r.		
Auspice Mobile Phone Number	er*		
Must be an Australian phone numbe	r.		
Auspice Primary Email *			
Must be an email address.			
Auspice Postal Address * Address			
Address			
Auspice ABN *			
The ABN provided will be used to check that you have entered the			ation. Click Lookup above
Information from the Australian Bus	iness Register	•	
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			
ATO Charity Type	More informa	ation .	
ACNC Registration			
Tax Concessions			
Main business location			
Must be an ABN.			
Auspice incorporation number	er *		
<b>Is your Auspice organisation</b> Yes	GST registe	ered? * ○ No	
Umbrella Organisation De	etails		

Form Preview

If your organisation is **not incorporated** or **does not have an ABN but is a sub-group of an umbrella organisation,** you will be required to provide the details of the umbrella organisation.

<b>Umbrella Organisa</b> Organisation Name	ation *		
3.			
Umbrella Project ( First Name	Last Name		
Umbrella Organisa	ation Primary Phone N	umber *	
Must be an Australian			
Must be an Australian	pnone number.		
Umbrella Organisa	ation Primary Email *		
Must be an email addre	ess.		
<b>Umbrella Organisa</b> Address	ation Postal Address *		
Address Line 1, Suburb	o/Town, State/Province, Post	code, and Country are re	equired.
Umbrella Organisa	ation ABN *		
	ill be used to look up the entered the ABN correct		Click Lookup abov
Information from the A	Australian Business Register		
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax	(GST)		
DGR Endorsed			

Must be an ABN.

ATO Charity Type

ACNC Registration
Tax Concessions

Main business location

**More information** 

Form Preview

Umbrella Organisation incorporation number *
Is your Umbrella Organisation GST registered?  ○ Yes
Application Details
* indicates a required field
Title of your activity *
Tell us briefly about your activity - what will the funds be used for? *
Word count:  Provide a quick snapshot/brief description how you are going to use the funds (for example "Installation of 7 seats around the local 3x3 basketball court" or "Annual New Year's Eve Fireworks display".
Activity start date - please note activities/projects MUST start after 1 June 2025
Must be a date and no earlier than 1/6/2025.
Activity end date - please note activities/projects MUST take place or completed by 30 June 2026 *
Must be a date and between 1/6/2025 and 30/6/2026.
Category
Choose a category - see category descriptions below to assist with choice - if unsure call, the Grants Officer 1300 366 244 *  © EVENT  © FUNDRAISING EVENT  © FACILITY IMPROVEMENT - ensure you have landowner permission & you have made contact with WSC Planning Department 1300 366 244  © PROJECT  © OTHER
<b>EVENT</b> Festival, Agricultural Show, Family Fun Day, Food & Wine Festival, community get

**EVENT** Festival, Agricultural Show, Family Fun Day, Food & Wine Festival, community get together, market, fireworks display, fishing competition, local or national celebrations, Triathlon, Fun Run, Walkathon, Rail Trail event.

**FUNDRAISING EVENT** Please note you will be asked to identify additional community outcomes on page 4.

Form Preview

#### **FACILITY IMPROVEMENT**

Air conditioner install, floor resurfacing, oven upgrades, hot water surface replacement/ install, fencing, interior/exterior painting, solar panel system install, LED globe replacement, water tank purchase, cricket net repair, football goal nets, netball changeroom renovation, specialist oval repair.

#### **PROJECT**

Equipment purchase such as chairs, tables, computer equipment, tools, uniforms, sports equipment. Specialised equipment - equipment that is vital for the function of your activity. Planning documents such as Strategic plans, Marketing plans, Feasibility study, building plans, concept plans, Event Management plans, Risk Management plans, Support services, such as Food Relief, carer support.

The committee have read the <u>'Climate Change and Sustainability Guidance Sheet'</u> and are aware of opportunities of how to achieve Sustainable activities and our activity is in accordance with Council's Climate Change and Sustainability Objectives.

O Yes O No
Activity location
List all locations if more than one by selecting add more button
Address
Is your location a Licensed venue?  O Yes O No

Please note: A member of Council's Social Planning team will be in touch to discuss your chosen venue and consideration for activities held at licensed venues.

Planning, Capacity and Community Benefit Assessment Questions

\* indicates a required field

Licensed Venues information

Please refer to the <u>Guidelines and Assessment Criteria</u>.

<u>Sample Answers for Grant Applications</u>

#### Tell us about your organisation and/or committee

What is your organisation's community purpose. \*

In December 2023 the Wellington Shire Council adopted a <u>Fair Access Policy</u> (the Policy) that seeks to address known barriers experienced by women and girls in accessing and using community and sporting infrastructure. The Policy aims to progressively build capacity and capabilities of Wellington Shire Council in the identification, and elimination of systemic causes of gender inequality in policy, programs, communications, and delivery of services in relation to community sports infrastructure. The Policy is designed to comply with the Gender Equality Act 2020, and the wider Victorian Government gender equality strategy and the Wellington Shire Council Gender Equality Action Plan (GEAP).

Council will undertake take the necessary and proportionate steps towards implementation of the Fair Access Policy which includes collecting and analysing data to ensure diverse representation on Committee's.

The community group/committee purpose and committee numbers questions are mandatory, remaining gender and diversity questions are optional. Responses are not used as part of the application assessment but will help inform industry training to committees and sporting clubs in partnership with key stakeholder including Change Our Game, GippSport and Gippsland Women's Health to inform them of Council's Fair Access Policy.

Tell us something s	pecial about your committee *
_	
How many committe	ee members in total *
Must be a number.	
Must be a number.	
Number of executiv	e committee members who are men
Must be a number.	
Number of executiv	e committee members who are woman
Trainber of exceutiv	
Must be a number.	
Number of executiv	e committee members who are gender diverse
Must be a number.	
Number of non-exe	cutive committee members who are men
Must be a number.	
Must be a number.	

Number of non-executive committee members who are woman
Must be a number.
Number of non-executive committee members who are gender diverse
Must be a number.
How often does your committee meet - choose from the list provided. *
now often does your committee meet - choose from the list provided.
Describe the outcomes you've achieved from previous activities/projects. If no previous activities, detail members who have skills that will assist with this activity.
Are you working with other community groups that will be involved in the activity - if yes, give details and list the groups.
Upload any additional information about your committee, if applicable. Attach a file:
Committee or Organisation Strategic plan, project plan, Committee Mission statement
Tell us what you will do with the funding
SUGGESTION: provide as much information as possible - this will ensure the assessment panel get a clear picture of you activity.
If you require assistance <u>Sample Answers for Grant Applications</u> are handy to understand what is required and the Grants Officer is available to assist on 1300 366 244.
Describe WHAT you are doing, HOW you are going to do it and WHY you are doing it. *

Upload any additional information, letters of support, if applicable.

Attach a file:
Activities that are primarily for the purpose of fundraising are required to demonstrate the Community benefits in addition to the fundraising outcome.
Tell us the community benefit of your activity other than fundraising
Attendance / Participation
Tick the target age range for attendance/participation *  Young Children (0 - 5)  Primary School Age (6 - 12)  Youth (13 - 17)  Young Adults (18 - 25)  Adults (up to 60)  Older Adults (over 60)  Woman and Girls  Men and Boys  People who are socio-economically disadvantaged
Tick any specific groups that this funding will focus on  □ Aboriginal and/or Torres Strait Islander People □ LGBTQIA+ □ Culturally and Linguistically Diverse □ Living with a Disability
Tick the home location of participants likely to attend  ☐ Wellington locals  ☐ People from outside of Wellington Shire  ☐ Interstate visitors
Tell us how you will let the community know about your activity
Helpful links: Marketing Toolkit Wellington Shire Council logo Middle of Everywhere logo Please note: All marketing is required to include Council acknowledgement and keep a copy of all publicity it is required to be submitted with your Acquittal Report.
What type/s of promotion and marketing are you going to use?  □ Social Media - explain what you would do and provide an example  □ Community newspaper  □ Commercial newspaper - provide costing & quote in budget section  □ Television - provide costing & quote in budget section  □ Radio - provide costing & quote in budget section

$\hfill \square$ Signs, Banners, etc - where will you place the signage, will it have maximum exposure, etc $\hfill \square$ Other
Provide details of each marketing option chosen above
Upload marketing example/s, marketing plan or schedule here Attach a file:
Tell us how you will know if your activity is successful
Evaluation of your activity is important to understand if your activity was successful and wil assist with your grant <b>Acquittal Report</b> (an <b>Acquittal Report</b> is a condition of Wellington Shire Council grant funding).
Which evaluation tool will you use to measure success? *  □ Surveys or feedback forms - provide an example □ Assessment of contractors and/or providers and suppliers - how will you do this? □ Collect data ie ticket sales, entry numbers □ Project review - how will you do this, who would attend? □ Other
Provide details of each option chosen above *
Upload your evaluation examples here Attach a file:
Access and Inclusion
All Activities must ensure inclusivity, social connectedness and accessibility has been considered.
Please take this opportunity to look at the <u>7 Principles in Universal Design especially 'Equitable Use'</u>
Another resource that is very helpful and insightful: <u>How do I Make my Activity more Inclusive?</u>
Please tick the Accessibility considerations you have made: *  ☐ Inclusivity – can all people, of any ability, culture and intellectuality be involved?  ☐ Affordability - do you have cost or ticket price options available?  ☐ Accessible parking - have you considered people with prams, walking frames, crutches, wheelchairs?

<ul> <li>Do you have wide, clear pathways and clear access to all amenities?</li> <li>Are handrails provided on stairs and ramps?</li> <li>Do you have visual information available: such as directional signage and maps?</li> <li>Are all your signs and information provided in large print and easy to read?</li> <li>Do you have accessible information on your website/ Facebook/flyer/posters?</li> <li>Do you have alternatives to any audible announcements eg. visible displays, hearing loops and AUSLAN interpreters?</li> <li>Have you considered providing water and shade provisions for assistance animals i.e. dog guides, hearing &amp; assistance dogs.</li> <li>Do you provide quiet spaces, seating and rest areas?</li> <li>Will you have placement of information stalls away from noisy stages?</li> <li>Will you have notification of flash photography and strobe lighting, ie warning signs?</li> </ul> Tell us how you are considering access and inclusion - use the above list as a guide.
Do you have an Accessible Action Plan? Please see link below for a template *  O Yes  No
https://pwd.org.au/wp-content/uploads/2019/09/Creating-Access-Accessibility-Action-Plan-template-WEB-and-PDF.pdf
Upload copy of Accessible Action Plan Attach a file:
Is your activity open to the general public? *  O Yes  No
Please explain why your event is not open to the general public *
Insurance, Permits and Budget - please note information provided impacts application eligibility
* indicates a required field
Public Liability Insurance
All applicants <b>MUST</b> provide a copy of a current Public Liability Certificate. <b>If certificate is not supplied your application will not be accepted.</b>
Please attach a current Public Liability Insurance Certificate * Attach a file:

Landowner permission must be provided

Event organisers please be aware that the event activity (i.e. market, festival, etc) MUST be listed under the business activity section of the Certificate of Currency.

## Who owns the land on which the activity will be held? Attach written permission from the landowner Attach a file: If you have not supplied landowner permission, please explain why Have you contacted Council Planning department? Please call 1300 366 244, the Planning Department will advise you on any permits or approvals required for your activity. Yes O No Please give details of who you spoke with and if applicable, list the permits or approvals required for your activity. Attach a copy of permits or approvals secured Attach a file: Explain why you have not called the planning department? Is your organisation GST registered? \* Yes $\bigcirc$ No **INCOME**

Please note there is no set amount of contribution required for this application.

#### Form Preview

If your club/organisation is registered for GST, you will be paid the grant amount, plus GST. If your club/organisation is not registered for GST, you will be paid the grant amount only (no GST applies). Please take this into consideration when calculating your funding request.

below can be edited	GST \$	GST \$
		Must be a dollar amount Must be a dollar amount.
Council funding - how much are you requesting	\$	\$

	Must be a dollar amount.	Must be a dollar amount.
Council funding - how much are you requesting	\$	\$
EG. Your organisation contribution - how much money are your contributing	\$	\$
EG. Sponsorship - estimated amounts if not confirmed	\$	\$
EG. Income from tickets - estimated amounts	\$	\$
	\$	\$
	\$	\$

#### **EXPENDITURE**

Expenditure Details (local suppliers & contractors preferred)	Expenditure amount excluding GST \$	Expenditure amount including GST \$
	Must be a dollar amount	Must be a dollar amount
	Must be a dollar amount.	Must be a dollar amount.
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

#### Budget Totals - Income and Expenditure must equal

Total Income Amount Including GST	Total Expenditure Amount Including	g GST	Income minus Expenditure must e	equal \$0.00
\$	\$		\$	
This number/amount is calculated.	This number/amount is calculated.		This number/amount is calculated.	

#### **Budget details**

<b>Upload all quotes here - mandatory for a</b> Attach a file:	all expenses over \$1,000
A maximum of 10 files may be attached.	

Have you included a	ll quotes, if not pleas	se explain *	
Have you been able	to use local suppliers	s and/or contractors	, if not please explain
Have you applied to	another funding bod	lv? Please include al	l details *
nave you applied to	another runding bod	iy: Flease ilicidde ai	i details
Contribution Asse	ssment questions		
How much are you a	pplying for? *		
\$ What is the total financia	l support from Council you	ı are requesting in this ap	pplication?
your monetary, dona	roup contributing to the state of the state	ship, etc - Do not ado	ould be a the total of d a dollar vaule for
\$ Must be a dollar amount.			
Please give details a sponsorship, volunto	bout your contributi eer labour, etc	on eg, how you are o	contributing,
Please give details i	f you are not contrib	uting to the activity.	
Valueing your Vol	unteer Labour		
For your activity tell us (if applicable)	what tasks each of you	ur volunteers are doing	and how many hours.
Tasks to be completed	Estimate how long each task will take - note 30 mins is .5, 1hr is 1, etc		Total volunteer labour hours of each task
	Must be a number	Must be a number.	This number/amount is calculated.

Volunteer labour	total		
This number/amount is c	alculated.		
Application Dec	aration and Auth	orisation	
* indicates a required	field		
Harmful Industrie	s Declaration		
one or more of the foll energy), sugary drinks collecting this informa	lude any businesses deri owing: unhealthy foods s, alcohol, tobacco, e-ciga tion to help form educat on shire community grou	(high in saturated fats, arettes and vaping, and ional opportunities on t	sugar, salt and/or sugar, salt and/or sugar, salt and/or
relationships (include	tion have any current, ding sponsorship, pro nefit from tobacco, va ? *	motions, signage) wi	th businesses which
Authorisation			
Community Assistance statements made in the	he guidelines and unders e Grant scheme. I certify his application are true. I is grant and complete th	that to the best of my lam authorised by my g	knowledge the
promote the financial of I understand that s	successful funding recipi contribution made by Co successful funding recipi weeks of the activity co	ouncil towards their action ents are required to sub	vity.
Name * First Name	Last Name		
PRIVACY STATEM	ENT		

#### Form Preview

The personal information provided on this form will be used by Wellington Shire Council for the purpose of the Community Grants Scheme. The personal information will be used solely by Council for that primary purpose or directly related purposes and will not be transferred to another agency.

For each sponsor (which comes under the Harmful Industries category) please name the sponsor and the type of promotion. If there is more than three, please detail the three largest sponsors.

Sponsor 1: (Name of Business)
Please select any elements which relate to this sponsor (select all that apply)  Promoted on website Promoted on social media Naming rights Signage at the grounds or clubhouse Sporting equipment branding Vouchers Other
Please list other sponsor agreement
<pre>Do you have another business sponsorship?     Yes     No</pre>
For each sponsor (which comes under the Harmful Industries category) please name the sponsor and the type of promotion. If there is more than three, please detail the three largest sponsors.
Sponsor 2 : (Name of Business)
Please select any elements which relate to this sponsor (select all that apply)  Promoted on website Promoted on social media Naming rights Signage at the grounds or clubhouse Sporting equipment branding Vouchers Other
Please list other sponsor agreement

#### **Event Notification Form**

#### \* indicates a required field

When organising an event, it is important to notify Council to ensure it complies with all current rules and regulations. Activities such as road closures, assembly of structures, food sales, etc, require a council permit.

The Events Coordination Team (1300 366 244) can also assist and will act as liaison between yourself (as event organiser) and relevant Council departments to ensure your event complies with Council requirements.

Information on how to navigate through the event organisation process can be found in the Events Guide located on our website; http://www.wellington.vic.gov.au/Enjoying-Wellington/ Events/Hosting-an-Event

**Please Note:** Some permits may attract fees.

#### Estimated expected numbers

For each day of the activity what are the estimated expected numbers? (If applicable)

Use drop box to choose from list		Day 2	Day 3	Day 4
	Must be a number.			

#### Total numbers expected

#### **Total Participation Numbers**

This number/amount is calculated.

#### How many toilets will be available on the day?

Have you arranged the required number of toilet facilities for patrons? (Please refer to **Events Guide for ratio information)** 

Male	Female	Unisex	Accessible
Must be a number.			

#### **Event Details**

Have you implemented an accessibility replan? Please attach to this application.  ○ Yes	need plan, emergency or risk management
Please attach site map to this applicatio Attach a file:	n.
Will the event involve food stalls and foo ○ Yes	od preparation?  O No
Will alcohol be sold, served or consumed ○ Yes	<b>3? *</b> ○ No
Will there be fireworks or pyrotechnics? ○ Yes	*
Will there be amusement rides / carniva	entertainment vendors? *
If so, please provide examples	
Will your event impact on traffic or park	ing? *
If so, please provide examples	
Will your event require road closures? *	
If so, please provide examples	
Will you be placing any signage on stree  O Yes	ets, roadsides, reserves or footpaths? *  O No
Will there be busking? *  ○ Yes	○ No
Will there be camping? * ○ Yes	○ No
Will there be an animal nursery? * ○ Yes	○ No
Will there be ground markings or the usareas and anchoring marquees, etc? *  Yes	e of stakes, signage pickets, fenced off
I understand that it is my responsibility management. Has this been arranged? *	
○ Yes	$\cap$ No

Form Preview

Will there be loud noise (e.g. ○ Yes	. music, PA systems etc)? *  O No	
I understand that it is my res my event and will do so. *	sponsibility to notify all local emerg	jency services of
○ Yes	○ No	
	ganiser I am responsible for this ev I have provided is true and correct	

#### Considerations when Organising an Event

The below checklist will assist in ensuring you have all the relevant information required for organising a successful event:

- · All food traders listed on **Streatrader** https://streatrader.health.vic.gov.au/
- · Organised First Aid
- · Attained a Victorian **Liquor** Licence <a href="https://www.vcglr.vic.gov.au/">https://www.vcglr.vic.gov.au/</a>
- · Organised a risk assessment/emergency plan
- · Informed Emergency Services
- · Contacted WorkSafe about **Fireworks** <a href="http://www.worksafe.vic.gov.au/pages/safety-and-prevention/health-and-safety-topics/explosives/fireworks">http://www.worksafe.vic.gov.au/pages/safety-and-prevention/health-and-safety-topics/explosives/fireworks</a>
- · Contacted **VicRoads** about road closures, traffic impacts or signage <a href="https://www.vicroads.vic.gov.au/traffic-and-road-use/events-and-filming-on-our-roads">https://www.vicroads.vic.gov.au/traffic-and-road-use/events-and-filming-on-our-roads</a>
- · Included details of camping on private land
- · Organised appropriate number of **toilets** and **amenities** depending on the size and type of event. Refer WSC Event Guide, section 5.8, for ratios
- · Organised ground maintenance/rubbish removal
- · Contacted **EPA** about noise impacts <a href="http://www.epa.vic.gov.au/business-and-industry/guidelines/noise-guidance/outdoor-venue-noise">http://www.epa.vic.gov.au/business-and-industry/guidelines/noise-guidance/outdoor-venue-noise</a>
- · Contacted surrounding **neighbours** to advise of your event and possible impacts