# 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.

I have read and understood the funding guidelines. \*  $_{\bigcirc}$   $\,$  Yes

I have contacted the Grants Officer - phone: 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: <u>https://www.coronavirus.vic.gov.au/public-events</u>

## **Contact Details**

\* indicates a required field

#### Conflict of Interest Declaration

# Do you, a family member, a member of the committee or someone involved in the planning/delivery of the project/program/event have a relationship with a council staff member and/or Councilor?

Yes
 No
 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

#### 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

<b>Does your organisation have an ABN? *</b> O Yes	⊖ No
Is your organisation incorporated? *	⊖ No

Is your organisation part of an umbrella organisation? An umbrella organisation is a centralised entity that oversees and coordinates the activities of multiple affiliated sub-groups, typically sharing a common purpose, mission, or interest. An organisation that consolidates administrative duties and expenses while still maintaining separate roles and functions within the community. \*  $\odot$  Yes  $\odot$  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 Bus	iness 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.

#### Applicant organisation incorporation number

#### Auspice Details

If your organisation is **not incorporated** or **does not have an ABN** you will be required to provide the details of an auspice organisation. The auspice will receive the grant funding on your behalf and will ultimately be responsible for the acquittal.

#### Auspice Organisation \*

 Auspice Organisation

 Auspice Project Contact \*

 First Name

 Last Name

Auspice Primary Phone Number \*

# CAG March 2025 Application Form Preview

Must be an Australian phone number.

#### **Auspice Mobile Phone Number \***

Must be an Australian phone number.

#### Auspice Primary Email \*

Must be an email address.

#### Auspice Postal Address \* Address

#### 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.

Informed the former that Acceleration Dece	la con Developera
Information from the Australian Bus	iness 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.

#### Auspice incorporation number \*

Is your Auspice organisation GST registered? \* ○ Yes ○ No

Umbrella Organisation Details

### CAG March 2025 Application 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.

Umbrella Organisat Organisation Name	ion *		
Umbrella Project Co First Name	ontact * Last Name		
Umbrella Organisat	ion Primary Phone N	umber *	
Must be an Australian ph	none number.		
Umbrella Organisat	ion Primary Email *		
Must be an email addres	<u></u>		
Must be an email addres	5.		
Umbrella Organisat Address	ion Postal Address *		
Address Line 1. Suburb/J	Town, State/Province, Post	tcode, and Country are requ	ired.
		teres, and country are requ	
Umbrella Organisat	ion 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 Bus	iness 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.

#### Umbrella Organisation incorporation number \*

Is your Umbrella Organisation GST registered? ○ Yes ○ No

# **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
- O OTHER

**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.

#### 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 <u>Council's Climate Change and Sustainability Objectives</u>.

\*

 $\bigcirc$  Yes

O No

#### Activity location

List all locations if more than one by selecting add more button

Address

Is your location a Licensed venue?

⊖ Yes

O No

Licensed Venues information

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

Please refer to the <u>Guidelines and Assessment Criteria</u>. Sample Answers for Grant Applications

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

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.

#### What is your organisation's community purpose. \*

#### Tell us something special about your committee \*

#### How many committee members in total \*

Must be a number.

#### Number of executive committee members who are men

Must be a number.

#### Number of executive committee members who are woman

Must be a number.

#### Number of executive committee members who are gender diverse

Must be a number.

#### Number of non-executive committee members who are men

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. \*

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.  $\ensuremath{^*}$ 

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 \*

- $\Box$  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
- □ LGBTOIA+
- □ 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

□ 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 will assist with your grant **Acquittal Report** (an **Acquittal Report** 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</u> <u>'Equitable Use'</u>

Another resource that is very helpful and insightful: <u>How do I Make my Activity more</u> <u>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?

- □ Do you have wide, clear pathways and clear access to all amenities?
- □ Are handrails provided on stairs and ramps?
- Do you have visual information available: such as directional signage and maps?

□ Are all your signs and information provided in large print and easy to read?

Do you have accessible information on your website/ Facebook/flyer/posters?

□ Do you have alternatives to any audible announcements eg. visible displays, hearing loops and AUSLAN interpreters?

 $\hfill\square$  Have you considered providing water and shade provisions for assistance animals i.e. dog guides, hearing & assistance dogs.

- □ Do you provide quiet spaces, seating and rest areas?
- □ Will you have placement of information stalls away from noisy stages?
- □ Will you have notification of flash photography and strobe lighting, ie warning signs?

# 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 \*

○ Yes ○ No <u>https://pwd.org.au/wp-content/uploads/2019/09/Creating-Access-Accessibility-Action-Plan-template-WEB-and-PDF.pdf</u>

#### **Upload copy of Accessible Action Plan**

Attach a file:

Is your activity open to the general public? \*

⊖ Yes

O 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 **MUST** provide a copy of a current Public Liability Certificate. If certificate is not supplied your application will not be accepted.

**Please attach a current Public Liability Insurance Certificate \*** Attach a file: 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.

### Landowner permission must be provided

#### 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

O No

#### INCOME

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

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.

# Income details - examples Income amount excluding Income amount including below can be edited GST \$ GST \$

031 <del>3</del>	031 <del>3</del>
Must be a dollar amount	Must be a dollar amount
Must be a dollar amount.	Must be a dollar amount.
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$
\$	\$

#### 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 \$ Income minus Expenditure must equal \$0.00

This number/amount is calculated.

\$

This number/amount is calculated.

Budget details	

#### **Upload all quotes here - mandatory for all expenses over \$1,000** Attach a file:

A maximum of 10 files may be attached.

#### Have you included all quotes, if not please explain \*

Have you been able to use local suppliers and/or contractors, if not please explain

Have you applied to another funding body? Please include all details \*

**Contribution Assessment questions** 

#### How much are you applying for? \*

What is the total financial support from Council you are requesting in this application?

How much is your group contributing to the activity - this should be a the total of your monetary, donated goods, sponsorship, etc - Do not add a dollar vaule for volunteer labour as volunteer labour is captured separately.

\$ Must be a dollar amount.

Please give details about your contribution eg, how you are contributing, sponsorship, volunteer labour, etc

#### Please give details if you are not contributing to the activity.

#### Valueing your Volunteer Labour

For your activity tell us what tasks each of your volunteers are doing and how many hours. (if applicable)

Tasks to be completed	Estimate how long each task will take - note 30 mins is .5, 1hr is 1, etc	volunteers will be	Total volunteer labour hours of each task
	Must be a number	Must be a number.	This number/amount is calculated.

# CAG March 2025 Application

#### Volunteer labour total

This number/amount is calculated.

# Application Declaration and Authorisation

#### \* indicates a required field

#### Harmful Industries Declaration

Harmful industries include any businesses deriving significant benefit or income from any one or more of the following: unhealthy foods (high in saturated fats, sugar, salt and/or energy), sugary drinks, alcohol, tobacco, e-cigarettes and vaping, and gambling) Council is collecting this information to help form educational opportunities on the impacts of harmful industries for wellington shire community groups.

# Does your organisation have any current, planned or past (12 months) relationships (including sponsorship, promotions, signage) with businesses which derive income or benefit from tobacco, vaping, fast food, sugary drink, alcohol or gambling industries? \*

- □ Yes
- 🗆 No

#### Authorisation

I declare I have read the guidelines and understand my obligations relating to the Community Assistance Grant scheme. I certify that to the best of my knowledge the statements made in this application are true. I am authorised by my group/organisation to be the applicant for this grant and complete this form.

#### Declaration \*

I understand that successful funding recipients are required to acknowledge and promote the financial contribution made by Council towards their activity.
 I understand that successful funding recipients are required to submit and Acquittal Report (final report) 8 weeks of the activity completion.

#### Name \*

First Name	Last Name

#### PRIVACY STATEMENT

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)

- $\Box$  Promoted on website
- Promoted on social media
- □ Naming rights
- □ Signage at the grounds or clubhouse
- □ Sporting equipment branding
- □ Vouchers
- $\Box$  Other

#### Please list other sponsor agreement

#### Do you have another business sponsorship?

- ⊖ Yes
- O No

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; <u>http://www.wellington.vic.gov.au/Enjoying-Wellington/</u> 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 <u>Events Guide</u> for ratio information)

Male	Female	Unisex	Accessible
Must be a number.			

#### Event Details

Have you implemented an accessibility n plan? Please attach to this application. O Yes	eed plan, emergency or risk management
Please attach site map to this application Attach a file:	n.
Will the event involve food stalls and foo O Yes	od preparation?
Will alcohol be sold, served or consumed O Yes	? * ○ No
Will there be fireworks or pyrotechnics? O Yes	* ○ No
Will there be amusement rides / carnival	entertainment vendors? *
If so, please provide examples	
Will your event impact on traffic or parki	ng? *
If so, please provide examples	
Will your event require road closures? *	
If so, please provide examples	
Will you be placing any signage on stree $\bigcirc$ Yes	<b>ts, roadsides, reserves or footpaths? *</b> No
Will there be busking? * O Yes	⊖ No
Will there be camping? * O Yes	⊖ No
Will there be an animal nursery? *	⊖ No
Will there be ground markings or the use areas and anchoring marquees, etc? *	
⊖ Yes	○ No
I understand that it is my responsibility a management. Has this been arranged? * O Yes	to organise rubbish removal/waste O No

Will there be loud noise (e.g. music, PA systems etc)? \*

I understand that it is my responsibility to notify all local emergency services of my event and will do so. \* Yes
No

I acknowledge that as the organiser I am responsible for this event, and I hereby declare that the information I have provided is true and correct.  $\bigcirc~{\rm Yes}$ 

### 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 https://www.vcglr.vic.gov.au/
- $\cdot$  Organised a risk assessment/emergency plan
- · Informed Emergency Services

· Contacted WorkSafe about **Fireworks**<u>http://www.worksafe.vic.gov.au/pages/safety-and-prevention/health-and-safety-topics/explosives/fireworks</u>

· Contacted **VicRoads** about road closures, traffic impacts or signage <u>https://</u>www.vicroads.vic.gov.au/traffic-and-road-use/events-and-filming-on-our-roads

· Included details of **camping** on private land

 $\cdot$  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 <u>http://www.epa.vic.gov.au/business-and-industry/</u> guidelines/noise-guidance/outdoor-venue-noise

· Contacted surrounding neighbours to advise of your event and possible impacts