

## Quick Response Grant Application Form



### GRANT POOL

Maximum per application: \$2,000  
Total amount per ward: \$3,000  
X 7 wards  
Total pool: \$21,000

### OPENING DATE

1 July each year

### CLOSING DATE

Last Friday of May each year or until funds are expended

Please refer to the Quick Response Grant Guidelines before completing this application form, available at [www.nillumbik.vic.gov.au/communitygrants](http://www.nillumbik.vic.gov.au/communitygrants)

Our Quick Response Grants support local groups and organisations by funding small projects that meet an identified community need. We respond to these applications in a timely and flexible manner.

To be eligible for a Quick Response Grant you (or your auspice body) must be an incorporated non-profit community group or organisation with a certificate of currency and public liability insurance to the value of \$10 million.

Projects will be ranked against the following criteria. The percentage allocated represents the weighting Nillumbik Shire Council will use to assess all applications.

- Community driven and responding to a genuine community need with sustained benefits (60%)
- Capacity of the applicant to deliver the project (40%)

Priority will be given to projects that (a) create new community partnerships and/or engage the wider community, (b) align with the *Nillumbik Health and Wellbeing Plan 2013-2017*, a copy of which can be found at [www.nillumbik.vic.gov.au](http://www.nillumbik.vic.gov.au)

### ORGANISATION DETAILS

To be eligible for the Quick Response Grant you (or the auspice body) must be an incorporated non profit community group or organisation with a certificate of currency and public liability insurance to the value of \$10 million.

Name of community group or organisation:

Title of project:

If you are applying on behalf of another organisation (i.e. providing an auspice), please fill in both columns in the *Organisation Details* section and ensure that both organisations sign the form under *Certification*.

### ORGANISATION DETAILS

### AUSPICE DETAILS

Group/organisation applying for grant:

Auspice organisation applying on behalf of group:

Postal address:

Postal address:

Street address (if different from above):

Street address (if different from above):

**ORGANISATION DETAILS****Contact person details:**

Name:

Position:

Phone:

Mobile:

Email:

Incorporated non-profit organisation\*  Yes  NoCertificate of Currency\*  Yes  NoPublic Liability Insurance\*  Yes  No

\*Please attach copies

**AUSPICE DETAILS****Contact person details:**

Name:

Position:

Phone:

Mobile:

Email:

Incorporated non-profit organisation\*  Yes  NoCertificate of Currency\*  Yes  NoPublic Liability Insurance\*  Yes  No

\*Please attach copies

**If your group or organisation is not based in Nillumbik, please state how your activity will benefit the Nillumbik community:****Have you received a grant from Nillumbik Shire Council in the past three years? If yes, please provide details:****Describe any other financial support your group/organisation receives from Council:** (Include any funding, in-kind contributions, rent, building usage, promotion, etc.)

## PROJECT DESCRIPTION

**Please use this page to describe your project.** What is your project? (Try to summarise it in a sentence.) Where will your project take place? Why is it a priority for your organisation and your community? What will the grant money be spent on? Who will be involved? Who will benefit? Does it engage the wider community or encourage new community partnerships? How will you achieve your goals? Is the project sustainable in the future?

Describe the project activities and provide a timeline.

PROJECT ACTIVITIES	MONTH / YEAR

List any partner organisations or groups involved in the project, as well as their roles and responsibilities and contribution to the project. (Please attach emails or letters of support from partner organisations confirming their support and contribution.)

PARTNER ORGANISATION	ROLES AND RESPONSIBILITIES	CONTRIBUTION \$	CONTRIBUTION IN-KIND

**Project start date:** (Keeping in mind projects cannot begin before payment is approved and processed – see guidelines for more information.)

**Project end date:**

I have contacted my Ward Councillor to discuss my initiative. (Please note: this is a requirement of the application process. See [www.nillumbik.vic.gov.au](http://www.nillumbik.vic.gov.au) for contact details of Ward Councillors.)

Ward:	Name of Councillor:
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**Date spoken to Councillor and received verbal support:**

I have spoken to the Grants Office.

## BUDGET

Outline your project budget and include your own organisation's cash and/or in-kind contribution. Also include any confirmed; unconfirmed and in-kind contributions from partner organisations and other funding bodies. (C = Confirmed; NC = Not Confirmed, IK = In-kind)

Please note: It is expected that the applicant(s) will make a financial and/or in kind contribution to the project.

Please refer to the Budget Help Sheet at [www.nillumbik.vic.gov.au/communitygrants](http://www.nillumbik.vic.gov.au/communitygrants)

INCOME			C/NC	\$	EXPENDITURE			IK	\$
Nillumbik Community Fund					Materials and project costs				
<b>Other grants</b> (name of funding body)					Fees and wages				
					Promotion and publicity				
					Venue costs				
Entry/participant fees					Administration				
Cash from own organisation					<b>Other</b>				
In-kind from own organisation									
Cash from partner organisation									
In-kind from partner organisation									
Other									
<b>TOTAL*</b>					<b>TOTAL*</b>				

\*Total income should equal project expenditure

What items will be funded by the Nillumbik Community Fund?

Please include a copy of all quotes.

## NOTES

- Your budget needs to reflect all the costs associated with the project excluding GST.
- Include a statement outlining the items which will be funded by the Quick Response Grant.
- In-kind contributions must appear in both the Income and Expenditure columns. Indicate with a tick if the expenditure is in-kind (IK).
- Mark any other grants or contributions with C = Confirmed or NC = Not Confirmed.
- Include any costs for equipment, services, venue hire or permits based on quotes.

For a sample budget refer to 'Budget Help Sheet' at [www.nillumbik.vic.gov.au/communitygrants](http://www.nillumbik.vic.gov.au/communitygrants)

## PAYMENT REQUEST FORM INCLUDING NEW SUPPLIER'S DETAILS

Please complete this form and return with your Quick Response Grant application. Should your application be successful this form will be used to ensure prompt payment.

Organisation name:

Address:

Suburb:

State:

Postcode:

Phone:

Fax:

Applicant's email:

Organisation/group email:

ABN:

Registered for GST:

Yes

No

### Payment Methods

Payment Instrument:  EFT  Cheque

### For EFT Payments Only

Bank Name:

BSB Number:

Bank Account No:

## OFFICE USE ONLY

Entered by:

Date:

Preparing Officer Name and Signature:

Date:

Authorising Officer Name and Signature:

Date:

GL ACCOUNT#

EX GST \$

GST \$

TOTAL \$

0316.6249

## CERTIFICATION

I, the applicant, certify that all details supplied in this application form and in any attached documents are true and correct to the best of my knowledge. The application has been submitted with the full knowledge and agreement of the management of the community group, organisation or auspice body. I have read the accompanying guidelines and information to applicants provided with this application form.

### GROUP ORGANISATION

Name:

Title:

Date:

### AUSPICE ORGANISATION

Name:

Title:

Date:

The CEO or equivalent of your community group or organisation should read this form. When using an auspice organisation, then both the CEO of your organisation and the auspice organisation needs to read this form.

## SUBMITTING YOUR APPLICATION

### Downloading the application form:

1. Go to [www.nillumbik.vic.gov.au/communitygrants](http://www.nillumbik.vic.gov.au/communitygrants) to download the application form and guidelines in writeable pdf format.
2. Save the forms to your computer.
3. The form can be completed electronically by typing into the fields and saving your changes. Or you can print the form and complete it manually.
4. If you are posting or delivering your application, please do not use staples.
5. If you are unable to download the form and would like a copy sent to you, contact the Grants Office on 9433 3153 or 0439 573 452 or email [grants@nillumbik.vic.gov.au](mailto:grants@nillumbik.vic.gov.au)

### Submitting your application

Complete the checklist on the following page before you submit your application using one of these methods:

#### By email

Email an electronic copy of your application form and electronic copies of all supporting material to [grants@nillumbik.vic.gov.au](mailto:grants@nillumbik.vic.gov.au)

#### By mail

Post one printed copy of your application form and copies of your supporting material to:

Nillumbik Community Fund  
Nillumbik Shire Council  
PO Box 476  
GREENSBOROUGH VIC 3088

#### In person

Deliver one printed copy of your application form and copies of your supporting material to Customer Service between 9am and 5pm, Monday to Friday:

Nillumbik Community Fund  
Nillumbik Shire Council  
Civic Drive  
GREENSBOROUGH VIC 3088  
(Melway 11 A10)



[www.nillumbik.vic.gov.au](http://www.nillumbik.vic.gov.au)

## CHECKLIST

To ensure your application is considered, it is essential that you complete all sections of this application form and provide all supporting documentation as requested.

### Required supporting material

- Public liability insurance certificate.
- Certificate of currency.
- Quotes for any services or products required for the project.
- Emails or letters of support from partner organisations.

- I have read the guidelines and application form.
- The project satisfies the grant criteria.
- I have contacted the Grants Officer either by telephone or email to discuss my eligibility and project idea.
- My organisation has acquitted any previous Council grants.
- I have completed every question in the application form.
- I have referred to the Budget Help Sheet.
- My community group or organisation has made a financial and/or in-kind contribution to the project.
- The income and expenditure totals are the same.
- I have proof read my application and kept a copy for myself.
- I have included with my application all required supporting material including proof of public liability insurance, certificate of currency, quotes for any services, equipment or products.
- My project partners have read the application and have approved their role and contribution to the project.
- I have contacted my Ward Councillor to discuss my initiative. (Please see Council website for Councillor's contact details.)