### **Grant Conditions**

### About this grant

Grants of up to \$1,500 are available to facilitate community projects that will reduce isolation, empower, foster harmony and boost the wellbeing of older people in Nillumbik.

Social and community connection is an important part of an individuals life. Connecting socially and actively participating in community is a key contributor to achieving good mental wellbeing as we age. In recognition of the importance connection has on a person's health and wellbeing, this grant will support activities and events that will help connect people over 55.

#### What can be funded

Funding is available to assist in delivering initiatives and activities that will foster social connectedness for their members and the broader community, such as but not exclusive to:

- · Community events and activities
- Equipment
- Promotional materials

### Eligibility criteria

To be eligible applicants **MUST**:

- Be an incorporated not-for profit organisation, community group or individual that lives, works, studies, volunteers or plays in Nillumbik
- Unincorporated groups must be auspiced by an incorporated body
- Hold a minimum of \$10 million public liability insurance
- Have acquitted and be compliant with all Nillumbik grants previously awarded by Council

### Ineligibility criteria

Applications will **NOT** be considered for:

- Projects, events or activities that are held outside the Nillumbik municipal boundary
- Projects, events or activities that will not substantially benefit the Nillumbik community
- Ongoing operational expenses or core business costs (E.g. salaries, administrative costs, maintenance costs, uniforms, utility bills, etc.)
- Projects that are curriculum based or entirely student or congregation focused
- Projects solely for fundraising purposes without broad community benefit
- Competitions with no community component
- Prize money and awards

- Projects or events with a political or religious purpose
- Events that are fully ticketed with no free or heavily subsidised component
- Alcohol or gambling related activities
- Projects that could be funded via other Council grant programs
- Projects that have received full funding from another source
- Retrospective funding for projects which are due to commence prior to the notification of the application outcome
- Applicants that are in debt to or have any outstanding commitments with the Shire.

### **Contact Details**

\* indicates a required field

	<b>ur name *</b> st Name	Last Name
Yo	ur email *	
Mu	st be an email addres	S.
Yo	ur phone number	*
00000	w do you describ Female Male Non-binary Prefer not to say Prefer to self descr	<b>e your gender? *</b> ribe
	ur connection to Live Work Volunteer Study Play No connection to N	

Organisation, Community Group or Club name * Organisation Name
Organisation type: *  Not-for-profit incorporated organisation School (kindergarten to year 12) Unincorporated (auspiced) Individual (auspiced)
Your position *
Organisation, Community Group or Club address * Address
Address Line 1, Suburb/Town, State/Province, and Postcode are required.
Organisation, Community Group or Club email
Auspice details
Auspice name *
Organisation Name
Auspice address * Address
Address Line 1, Suburb/Town, State/Province, and Postcode are required.
Auspice email *
Financial Details
Does your organisation, community group or auspice have an ABN? *  O Yes  O No  If your organisation does not have an ABN, you are required to attach a Statement by a Supplier available from the ATO before submitting your application.

ABN \*

	d will be used to look up the ave entered the ABN correct		Click Lookup above to
	he Australian Business Register		1
ABN	ne Australian business negister		
Entity name			
ABN status			
Entity type			
Goods & Services	Tax (GST)		
DGR Endorsed	,		
ATO Charity Type	More inform	ation	
ACNC Registration			
Tax Concessions			
Main business loca	ation		
Must be an ABN.			
Download form			
Download form			
Statement by a	Supplier *		
Attach a file:			
Only required if you	ur oganisation or auspice do no	t have an APN	
Only required if you	ur oganisation or auspice do no	t liave all ADN	
Is the Organisa  O Yes	tion, Community Group o	r Auspice registered	l for GST *
	ay a GST amount on top of the	•	
Dalamana banda a	account of the Owner starts		A! ¥
Account Name	ccount of the Organisation	on, Community Grou	p or Auspice *
BSB Number	Account Number		
Desire to Dete	912		
Project Deta	IIS		
* indicates a requ	uired field		
Project name *			

Provide a brief description of the project for use in promotional materials if successful *
Word count:
Must be no more than 50 words.
Project start date *
Project end date *
Where will your activity, project or event take place? *
Purpose of funds requested? *
Provide a short description (100 words recommended) of your project - what do you plan to do?
How will this project connect people over 55 socially? *
What do you want the project to achieve?
Nillumbik Shire Council is committed to creating a fair, equitable and inclusive communit and acknowledge that some groups and individuals experience more barriers than others
Indicate if your project aims to target any of the priority groups identified in
Council's Access, Equity and Inclusion policy including: *
☐ Children and young people
<ul><li>☐ Cultural and linguistically diverse people</li><li>☐ First Nations People</li></ul>
☐ LGBTIQA+ communities
<ul><li>☐ Gender diverse people</li><li>☐ Older people</li></ul>
☐ People experiencing financial insecurity
☐ People who live rurally or are geographically isolated
People with a disability, chronic disease and/or mental illness
<ul><li>□ Refugees and people seeking asylum</li><li>□ Women and girls</li></ul>

□ Not applicable www.nillumbik.vic.gov.au/Con inclusion	nmunity/Comm	nunity-development/Com	munity-Toolkit/Access-equity-and-
How will this project sup	pport the gr	oups of people you	have selected above? *
Project Budget			
* indicates a required field			
Total amount requested	*		
What is the total financial sup	port you are re	equesting in this applicati	on?
Total project cost *			
\$			
What is the total budgeted co	st (dollars) of y	our project?	
Is there a cost to partici  ○ Yes	pants to un		<b>y? *</b> ○ Gold coin donation
	0		mponent will not be considered
How much will participa	nts be char	ged? *	
Must be a dollar amount.			
In a a ma a			
Income			
Examples of income includ expected participation/entr			organisation funds, minimum
• Mark income as <b>C</b> (co	nfirmed) or <b>N</b>	(not confirmed)	
Income	\$		Status
Connection Grant	\$		
	\$		
	\$		

### Expenditure

Identify how you will spend the Grant funds towards your project.

•	Include any	v costs for	equipment,	services,	venue hire o	or permits	based on c	luotes

•	Your budget	needs to	reflect all	the costs	associated	with the	project	excluding	GST

Expenditure	\$
	\$
	\$
	\$
	\$

### **Budget total**

#### The total income must equal the total expenditure of the project

Total Income Amount	Total Expenditure Amount	Income - Expenditure
\$	\$	\$
This number/amount is	This number/amount is	This number/amount is
calculated.	calculated.	calculated.
		Must be \$0

#### In-Kind contributions

List any in-kind support being provided by your organisation or other organisations here, and give an estimated value of this support. How much would you have to pay for these goods or services if they were not being provided free of charge? For example volunteer time could be calculated at a rate of \$25 per hour, or at \$35 per hour for skilled tasks.

Examples of in-kind contributions might include: free use of a venue, administrative support, volunteer time, or donated refreshments or any other donated goods or services.

In-kind contribution	\$ Value
	\$
	\$

#### **Total in-kind contribution**

\$

This number/amount is calculated.

### **Attachments**

\* indicates a required field

Required supporting material

<b>Public Liability</b>	Insurance Certificate
Attach a file:	

You must have public liability insurance to a minimum value of \$10 million on commencement of the project

If you do not hold current Public Liability Insurance:

- Applications may be submitted without current Public Liability Insurance on the condition that if the grant is successful insurance is purchased and a Certificate of Currency is provided
- You should apply through an auspice organisation if your group does not wish to purchase insurance
- Or you may be eligible for coverage under<u>Councils Community Liability insurance</u> if your activity is entirely held in a Council venue.

<b>Auspicing organisation letter of support</b> Attach a file:
Additional supporting material (if r
Other supporting materials Attach a file:
Attach a file:

### Privacy Statement, Declaration and Your Feedback

\* indicates a required field

### Privacy statement

Nillumbik Shire Council is collecting your personal information for the purpose of registering and assessing your Grant application.

The information you provide will be used for this purpose or a directly related secondary purpose. This information will only be disclosed to third parties if we are permitted to, required to by law, or if Council uses an external panel to assess the Grant applications.

If you do not provide the requested information or it is only provided in part, we may be unable to accept or consider your application.

You may access the personal information that Council holds about you by contacting Council's Privacy Officer on 9433 3271 or privacy@nillumbik.vic.gov.au

### Declaration

I certify that: *						
	I have read and understand the terms and conditions in the Grant Guidelines;					
	All details supplied in this application form and in any attached documents are true and					
cor	rect to the best of my knowledge;					

□ This application has been submitted with the full knowledge and agreement of the management of the community group, organisation or auspice body; □ I agree to ensure all necessary approvals and permits are obtained prior to my project or event taking place; □ I understand that if Nillumbik Shire Council approves a grant, I will be required to accept the conditions of the grant in accordance with Nillumbik Shire Council requirements; □ I understand that Nillumbik Shire Council does not accept any liability or responsibility for the proposal in this application and that it is the responsibility of the applicant or their auspicing sponsor to provide appropriate insurance cover; and, □ I consent to the release of project information in this application for promotional and evaluation purposes relevant to Nillumbik Shire Council. At least 7 choices must be selected. All of the above must be checked								
	thorised Person's							
Fir	st Name	Last Name						
Da	ate of Declaration	*						
Mι	ist be a date.							
Fe	eedback							
					garding our online grants assess your application.			
Is this the first time you have applied for a grant with Nillumbik Shire Council?  ○ Yes  ○ No								
0000	Very satisfied are you Very satisfied Satisfied Neither satisfied or Dissatisfied Very dissatisfied			on process?				
Do	you have any coi	mments al	oout our a	pplication process?				
E.(	G. What worked well, o	r what could	be improved	1?				
	Nillumbik Council v Council Officer Social media Network/Newslette Nillumbik News Local media Word of mouth	vebsite	cil's grant	program?				

☐ Other:		