

COMMUNITY DEVELOPMENT FUNDING

APPLICATION FORM 2023 – 2024



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COMMUNITY DEVELOPMENT FUNDING APPLICATION FORM 2023 – 2024

The City of Albany's Community Development Funding aims to increase community wellbeing, resilience and connection by enabling local initiatives that bring people together, and create a strong thriving community.

APPLICANT DETAILS	
Before you start, please contact the Community Development Team on 6820 3023 to discuss your project idea.	
Date of discussion:	
Officer spoken to:	
Organisation name:	
Contact person:	
Postal address: <i>This is the address that the City of Albany will send hardcopy documents to i.e. Funding Agreements</i>	
Telephone:	
Email:	
Is the applicant (tick one box only):	<input type="checkbox"/> an organisation <input type="checkbox"/> individual
Note: individuals must be auspiced by an incorporated organisation. Please complete the auspicings body details below.	

ORGANISATION DETAILS

Is your organisation incorporated?

(You may be required to supply a copy of your Certificate of Incorporation if your application is successful)

Yes (date of incorporation) _____

No (please complete the auspicing organisation details below)

Please provide some information about your organisation (or auspicing organisation). For example what the organisation does, its client or service base, objectives/goals/vision etc.

If the applicant is an individual, or a non-incorporated group, please complete the following section.

Auspicing organisation's name:	
Contact person:	
Postal Address: <i>This is the address that the City of Albany will send hardcopy documents to i.e. Funding Agreements</i>	
Telephone:	
Email:	

ALL APPLICANTS TO COMPLETE THE FOLLOWING:

Is the applicant or auspicing organisation covered by public liability insurance?:

Yes (please state level of cover and expiry date) _____

No

PROJECT DETAILS

Project title:

Project summary:

(No more than 50 words. The information supplied here will be used by the City to describe the project to the public where applicable)

Project start date:

Project end date:

What is the location where your project will take place?

Which funding stream and priority does your project/initiative align with?

(Please select only one funding stream)

Vibrant inclusive and connected neighbourhoods

Increasing community engagement and participation in local events and in community life, in particular with marginalised or disadvantaged population groups.

Connecting people to their local neighbourhood by reducing isolation and building local connections where people live.

Activating under-utilised neighbourhood amenities (eg parks and reserves).

Hosting events, place-making, story-telling and creative expression in local neighbourhoods.

OR

Strong thriving community groups

Upskilling and increasing the capacity of committee/board members and activity leaders with appropriate training and professional development

Increasing or retaining membership through marketing drives, or redevelopment/development of websites

Increasing the ongoing sustainability of the organisation through innovative projects and initiatives

OR

Supporting the vulnerable

Improving community health and wellbeing in particular by marginalised or disadvantaged population groups;

Increasing the resilience of those impacted most significantly by COVID-19 restrictions and/or other emergency;

Funding requested: (excluding GST)	
Total project cost: (excluding GST)	

Project partners:
 (list the organisations, groups, and/or stakeholders involved in delivering your project, and describe their input)

Please describe your project in detail as follows and attach to your application. If you need more space, you can attach no more than a single A4 page

(single sided, Arial 11 point font, single spaced) Refer to Grants Guidelines for the assessment process.

What are you going to do?

How does your project meet the funding priorities you have identified?

If your project activates under-utilised neighbourhood amenities, please describe in more detail.

Outline how you have involved community members (target and/or wider community members) in the design, implementation and delivery of the project.

How will you determine whether your project was successful?

**Which of the following ways are you able to acknowledge the City of Albany's support for the project?
 (Please tick all that are relevant)**

Acknowledgement of City of Albany support (and other sponsors where appropriate) in advertising and media publicity

City of Albany (and other sponsors where appropriate) signage while the project is occurring

Verbal acknowledgement during the project

Formal invitations to City of Albany Mayor and/or Councillors to attend project activities, official functions and hospitality opportunities

The Mayor or Councillors to be invited to present the welcome or opening speech at the commencement and/or launch of the project

BUDGET

Please outline the total cost of your project. Include any contribution from your organisation, contributions from other funding bodies, and estimated in-kind contributions. In-kind contributions are goods, services, time, expertise, or other non-cash contributions which assist the development, delivery and/or evaluation of the project.

Income Source	Amount \$ (excluding GST)
Request from the City of Albany Please note the City will provide a maximum contribution of \$5,000	\$
Your cash contribution (If any)	\$
Other cash contributions Please provide confirmation of any other funding received	\$
Total cash contributions	\$
In Kind contributions (Estimated value)	\$
Total project income (= total of all cash contributions + in-kind contributions)	\$

PROJECT COST

Please outline your project's total cost using the table below. Attach written quotes for major budget items for any amount over \$1,000.

Item/s Description	Total item cost (excl GST)	\$ requested from CoA (excl GST)	\$ requested from others (excl GST)	\$ provided by applicant (excl GST)	\$ in kind support contributions
Example Full page advertisement in local newspaper	Example \$800	Example \$400	Example \$0	Example \$400	Example \$0
Total					

Has your organisation received funding from the City of Albany in the past five years?	
Yes	No

If yes, please provide details		
Year	Purpose	Amount

APPLICANT DECLARATION

I, the undersigned, certify that I have been authorised to submit this application and that the information contained herein or in the attachments is, to the best of my knowledge, true and correct.

Name:	
Signature:	
Position:	
Date:	

CHECKLIST

- Please ensure you have:**
- Read the application guidelines carefully
 - Discussed your proposed event with the Community Development Team
 - Confirmed you or your organisation meets the eligibility criteria
 - Developed a project that aligns with at least one of the funding priorities
 - Completed ALL sections of the Application Form (including project detail and budget)
 - Attached any letters of support, quotes and supporting information
 - Proofread application and amended any spelling or grammatical errors
 - Attachments (please specify)