Major Grants Expression of Interest Draft Form

Category One:

1. Community Development Major Grant

Up to $50,000 per year for up to 3 years

Please refer to the Grant Guidelines and scheduled before applying and note that hard copy, faxed or emailed application will not be accepted.

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| --- | --- |
| **Name of Organisation** |  |
| **Street Address** |  |
| **Postal Address** |  |
| **Contact person and Position** |  |
| **Phone** |  |
| **Email** |  |
| **Name of Application** |  |
| **Years of funding sought** |  |
| **Amount of Funding Sought per year (up to $50,000 per year)** | *Year One: $* |
| *Year Two: $* |
| *Year Three: $* |
| **Date of Submission** |  |

**Please indicate which program priorities your application directly relates to   
(there can be more than one)**: *20%*

* Encourage residents and community groups to actively participate in their local city community
* Strengthen reconciliation practices
* Deliver inclusive responses to meet the needs of isolated and marginalised groups including, but not limited to, services to vulnerable people who are affected by extreme weather conditions
* Promote lifelong learning
* Increases volunteer participation
* Promote active participation in decision making
* Provide access to learning, services and ideas
* Create opportunities for people to connect with and welcome newcomers into their local neighbourhood

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| **Name of Application** |  | Assessment Weighting |
| **Brief Overview of the Application**  ***(Suggested 100 word maximum)*** |  | N/A |
| **Start Date** |  | N/A |
| **End Date** |  | N/A |
| **Where will the application take place?**  ***(It must be within the*** [***boundaries of the City of Adelaide including any of the Park Lands***](https://www.cityofadelaide.com.au/assets/documents/MAP-sponsorship-grants-map-boundary.pdf)**)** |  | N/A |
| **Who is the target group for your application?** |  | N/A |
| **How did you determine that this application was needed? What evidence do you have to support its development?**  ***(e.g. service statistics, ABS data, anecdotal observations)*** |  | 20% |
| **What outcome/s are you seeking to achieve?**  ***(Please ensure that you have read the Liveable actions in the*** [***City of Adelaide Strategic Plan 2016- 2020***](https://www.cityofadelaide.com.au/assets/Policies-Papers/docs/STRATEGY-strategic-plan.pdf) ***to ensure that your outcomes are consistent with those sought by Council).*** |  | 20% |
| **How will you measure your outcomes?** |  | 20% |

**What will COUNCIL'S FUNDS be used for (e.g. marketing, infrastructure hires, performance fees, insurance etc)?** *10%*

|  |  |
| --- | --- |
| **Expenditure** | **Amount** |
| Wages / Associated Costs / Facilitator Costs |  |
|  |  |
| Hire – Equipment / Venue / Infrastructure / Catering |  |
|  |  |
| Marketing & Promotion |  |
|  |  |
| Insurances |  |
|  |  |
| Fees / Permits |  |
|  |  |
| Miscellaneous |  |
|  |  |

**What partnerships relate to this application and what will each partner contribute?** *10%*

|  |  |  |  |
| --- | --- | --- | --- |
| **Partner Organisation/s** | **Contribution** | **Confirmed**  **(yes/no)** | **Name & Contact Details** |
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