

Category Two:

(2) Minor Grant

Up to $10,000 per application

Please refer to the [Grant Guidelines](https://d31atr86jnqrq2.cloudfront.net/docs/guidelines-community-development.pdf?mtime=20200721100646&focal=none) and schedule before submitting an application and note that hard copy, faxed or emailed applications will not be accepted.

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| --- | --- |
| **Name** |  |
| **Street Address** |  |
| **Contact Person and Position** |  |
| **Phone** |  |
| **Email** |  |
| **Name of Application** |  |
| **Amount of Funding Requested** |  |
| **Date of Submission** |  |

**Please indicate which program priorities your application directly relates to** (10% of assessment):

□ 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

**Part One – Application Summary**

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| **Name of Application** |  | *Assessment Weighting* |
| **Brief Overview of the Application**  (Suggested 100 word maximum) |  | *NA* |
| **Who is the target group for your application?**  (Refer Part 2 question 4) |  | 10% |
| **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, local engagement) |  | 20% |
| **What outcome/s are you seeking to achieve?**  (These outcomes must align with the strategic priorities of Council and the Community Development grant program priorities) |  | *10%* |
| **How will you measure your outcome/s?**  (Include both qualitative and quantitative measures) |  | *10%* |
| **Where will the application take place?** (It must be within the boundaries of the City of Adelaide including any of the Park Lands) |  | *NA* |
| **What will Council’s funds be used for** (e.g. marketing, infrastructure hires, performance fees, insurance etc) |  | *NA* |
| **Start Date AND End Date** |  | *NA* |

**1. What partnerships relate to this application and what will each partner contribute both in kind and financial?** (10% of assessment)

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| --- | --- | --- |
| **Partner** | **Contribution** | **Confirmed** |
| *DCSI Funding* | *Program Funding* | *$10,000* |
| *Administration of Program* | *In-kind by organisation* | *$4,000* |
| *Local Resident Group* | *In- kind volunteer hours* | *$500* |
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***Please provide evidence of support and partnerships in your documentation e.g. email or letter of support.***

**Part Two - Application Details**

1. **How does your application align with the strategic priorities of Council?** (10% of assessment)

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| Suggested 200 word maximum |

1. **How does your application align with key program priority areas outlined in the guidelines?** (10% of assessment)

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| Suggested 200 word maximum |

1. **How do you plan to engage your target group? Or how are you already engaging your target group?** (10% of assessment)

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| Suggested 200 word maximum |

1. **Please provide details of how you plan to deliver the project to achieve the outcome/s you outlined in Part One, including the consideration of risk, integration with other partners and innovation.** (15% of assessment)

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| Suggested 500 word maximum |

1. **Please provide details on how your project will undertake the following where applicable:** (15% of assessment)

Suggested 50 word maximum for each

* 1. Use renewable energy
  2. Promote sustainable travel to and from your project’s offerings
  3. Minimise waste to landfill
  4. Implement initiatives to save water and minimise water pollution
  5. Provide messaging on environmental sustainability issues
  6. Ensure that your project is easy to access and experience for people of all abilities, including people with access requirements
  7. Ensure that staff involved with your project have the capability to engage effectively with people of differing backgrounds, cultures and access requirements
  8. Ensure that your project is accessible for disadvantaged and vulnerable groups

1. **How will you acknowledge City of Adelaide’s support, including a Welcome to Country and/or Acknowledgment of Country as recommended on** [**Council’s website**](http://www.adelaidecitycouncil.com/your-community/culture-history/welcome-to-country/)**?**

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| Suggested 200 word maximum |

1. **Could your project proceed if only partial funding was received – please explain?**

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| Suggested 200 word maximum |

1. **Will ongoing funding support be required beyond the time outlined in this application?**

** Yes  No**

If yes, what is your plan for raising the required funds beyond this application period?

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| Suggested 200 word maximum |

1. **Is there any other information you think is relevant to your application? Please add additional information if directly relevant.**

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| Suggested 50 word maximum - List Attachments |

**Budget Template - Income and Expenditure** (10% of assessment)

* Please provide details on income and expenditure for the entire budget for your application, not just the funding you are requesting from the City of Adelaide.
* Items listed in the template are intended as a guide only. Add, change and delete items to better reflect the income and expenditure for your application.
* The total amount of income and the total amount of expenditure should be equal.
* Highlight (**boldface** **text**) the budget expenditure items you are proposing to use Council’s funding for.
* Ensure that you have read the Community Development Grant Guidelines and are aware of the budget items and activities that are not eligible for funding from the City of Adelaide.

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| --- | --- |
| **INCOME** | |
| **ITEM** | **AMOUNT** |
|  |  |
| ***City of Adelaide Grant*** |  |
|  |  |
| ***Applicant’s Contribution*** |  |
| Applicant’s financial contribution |  |
| Applicant’s in-kind contribution (e.g. staff hours, volunteer hours, venue) |  |
|  |  |
| ***Other Grants/Donations/ Partner Contributions*** |  |
| Other partner in-kind contribution (list all partners separately) |  |
| Other partner financial contribution  (list all partners separately) |  |
| Other fundraising and donations |  |
| State or Federal Government funding for associated program funding |  |
|  |  |
| ***Other Income*** |  |
| Exhibition fees |  |
| Stall holder fees |  |
| Performance fees |  |
| Ticket Sales |  |
| Other sales e.g.art work/ merchandise |  |
| Service fee (e.g. client contribution) |  |
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| **Total Income** |  |

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| --- | --- |
| **EXPENDITURE** | |
| **ITEM** | **AMOUNT** |
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| ***Wages / Associated Costs*** |  |
| Wages |  |
| Training for volunteers |  |
| Training for staff |  |
| Administration |  |
| Telephone |  |
| Travel |  |
| Volunteer reimbursement costs |  |
|  |  |
| ***Marketing & Promotion*** |  |
| Radio |  |
| Printing |  |
| Poster / Flier Design |  |
| Postage |  |
| Social media |  |
|  |  |
| ***Insurances*** |  |
| Public liability insurance |  |
| Personal accident insurance for volunteers |  |
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| ***Council Fees*** |  |
| Waste |  |
| Park Lands hire fee |  |
| Park Lands services fees  (e.g. gas, water, electricity) |  |
| Approvals (e.g. DA) |  |
| Road closure / traffic management |  |
| Permits |  |
|  |  |
| ***Other*** |  |
| Presenter / guest speaker fees |  |
| Catering |  |
| Designs / plans |  |
| Equipment and materials |  |
| Transport of materials |  |
| APRA licence |  |
| Liquor licence |  |
| Venue hire |  |
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| **Total Expenditure** |  |

**Has Council funded your organisation over the last (3) three years?**

If yes, please provide details below:

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| **Date Funded** | **Amount** | **For What Purpose** |
| **2019 - 2020** |  |  |
| **2018 - 2019** |  |  |
| **2017 - 2018** |  |  |

**How is your organisation constituted?**

* Incorporated Association
* Limited Company
* Auspice provided by an Incorporated Association
* Aboriginal and Torres Strait Islander Corporation

**How is your organisation managed?**

* Management Committee
* Board of Management
* Advisory Board
* Other - Please Specify

**Checklist**

Before submitting your application make sure you have:

* Discussed your application with Grants Officer
* Included a copy of your organisation's Certificate of Incorporation and most recent audited financial statement (or the auspice organisation)
* Included a copy of your Public Liability Insurance Certificate of Currency (if applicable)
* Included a copy of your Return to Work SA certificate of registration, or similar employee insurance policy, if paid staff are employed (if applicable)
* Completed all sections of the application form
* Kept a copy of your application for future reference

**Applicant Certification**

I certify to the best of my knowledge that the statements made in this application are true. I have read the City of Adelaide’s Community Development Grants Program Operating Guidelines. I understand that should this application be approved by the City of Adelaide that I would be required to accept the conditions of the grant in accordance with the Council’s accountability and reporting requirements.

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| **Name of Delegated Officer /**  **Auspice Organisation** |  |
| **Position** |  |
| **Signature** |  |