



# FUNDING APPLICATION FORM WILLIAM PEARSON BEQUEST

**APPLICATIONS FOR 2010/2011 CLOSE 5PM 9 JULY 2010  
NO LATE APPLICATIONS WILL BE ACCEPTED**

## **IMPORTANT**

Please complete all sections of the Application Form and keep a copy for your records. Failure to provide sufficient information will result in the project attracting a lower priority status during the assessment process.

### **SECTION 1 – CONTACT INFORMATION**

|                          |                    |
|--------------------------|--------------------|
| <b>Organisation Name</b> |                    |
| <b>Contact Name</b>      |                    |
| <b>Position</b>          |                    |
| <b>Postal Address</b>    |                    |
| <b>Contact Phone</b>     | (bh) (ah) (mobile) |
| <b>Email Address</b>     |                    |

#### **What is your organisation's legal status?**

- Incorporated Association   
 Unincorporated Association   
 Cooperative Association  
 Section 86 Committee   
 Other (Please specify): \_\_\_\_\_

**Your organisation's ABN** (applicants must have an ABN to be eligible): \_\_\_\_\_

**Is your organisation registered for GST purposes?**     Yes     No

### **SECTION 2 – PROJECT OVERVIEW**

**PROJECT NAME:** \_\_\_\_\_

**What are you going to do?** (Describe your project in 50 words or less)

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**Who will benefit from your project/purchase and how?** (Describe the place/s, groups and communities that the project is particularly relevant to)

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**Project start date?** \_\_\_\_\_      **Project completion date?** \_\_\_\_\_

**NOTE: Projects must be completed by 31 May annually.**



**FUNDING APPLICATION FORM**  
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It is important that facilities are easily accessible by all regardless of mobility status. Have you considered incorporating disability access into your facility? Will disability access be addressed by your project? If so, how? For more information on disability access – contact Council’s Rural Access Officer on 5795 0001.

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**SECTION 3 – PROJECT DETAILS – attach additional pages if needed**

**Why do you want to do your project?** (Describe the demonstrated need for this project, include information regarding any OH&S issues this project rectifies)

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**How will you carry out this project?** (Include project plan/event program, project stages, key dates, etc.)

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**Who will be involved in the project?** (Who will manage the project, list any other organisations that will be involved in the project and describe their input, attach letters of support if applicable)

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**What will the project achieve?** (What specific outcomes will be achieved)

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| <b>SECTION 4 – PROJECT BUDGET – all figures must include GST</b> |           |  |           |
|--|-----------|--|-----------|
| <b>Income</b>  |           | <b>Expenditure</b>   |           |
| Amount requested from Community Grants program                   | \$        | Total Quotes   | \$        |
| Your Organisation's Financial Contribution                       | \$        | Total In-kind labour                                       | \$        |
| Your Organisation's In-Kind Contribution                         | \$        | Permits (eg Planning/Building permits, etc. if applicable) | \$        |
| Other Community Financial Contributions                          | \$        | Other Expenditure  | \$        |
| Other Community In-kind Contributions                            | \$        |  |           |
| Other (please specify):  | \$        |  |           |
| <b>Total Income</b>  | <b>\$</b> | <b>Total Expenditure</b>                                   | <b>\$</b> |

**Total Income and Total Expenditure must be the same and include GST. You are required to attach your Club's most recent bank statement to this application.**

If you don't receive full funding amount requested, can you still undertake the project? If so, how will you fund any shortfall? If your project has a number of components, please list these in priority order and provide cost estimates for each priority (*attach separate sheet*).

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If project budget includes an in-kind contribution, please provide details of activities to be undertaken or goods to be donated. (Skilled labour – eg electrician \$35 ph, Unskilled Labour \$15 ph)

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Will there be a need for ongoing funding and maintenance after this project or purchase is completed (if applicable)? If so, please provide details of how this will be achieved and by whom.

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**SECTION 5 – DECLARATION OF APPLICANT**

I declare that the information supplied in this form is to the best of my knowledge accurate and complete and has the prior approval of the organisation's Executive Committee.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

**Ensure all items on the checklist over the page have been attached to this Application**



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## CHECKLIST – Have you:

- Included your ABN?
- Adequately addressed all of the relevant Assessment Criteria?
- Completed a Project Budget – making sure both sides have the same balance?
- Attached quotations?
- Attached your Club's most recent bank statement?
- Attached a copy of your Certificate of Currency of Public Liability Insurance? (not applicable for purchases)
- Completed Form One of Strathbogie Event Planning Guide? (Community Event applications only, contact Council's Grants Coordinator for more information if required)

### Completed Application Forms should be forwarded to:

Grants Coordinator  
Strathbogie Shire Council  
PO Box 177  
EUROA VIC 3666  
or via email – [info@strathbogie.vic.gov.au](mailto:info@strathbogie.vic.gov.au)

### ***For office use only***

#### **Assets Department**

Council's Assets Department acknowledges this application. Comments:

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**Signed:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Date:** \_\_\_\_\_

#### **Tourism & Events Department**

Council's Tourism & Events Department acknowledges this application. Comments:

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**Signed:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Date:** \_\_\_\_\_