Community Grant Program 2025 Application Form

Grant Information

* indicates a required field

Community Grants Program

Funding of up to \$5,000 is available for projects and events that meet the funding guidelines and at least one of the following objectives:

- Support increased demand from Mandurah's most vulnerable communities
- Build capacity of community organisations and resident associations
- Increase volunteering, including capacity and training
- Improve access to technology for education and training
- Celebrate and encourage cultural diversity and social inclusion
- Create opportunities for localised smaller scale events (within allowed government restrictions)
- Youth Development, especially initiatives that build capacity and support leadership initiatives
- Celebrate Mandurah's resilience through Arts & Culture
- Build neighbourhood connection
- Celebrate and highlight local indigenous culture

Click here to view the Guidelines on the City of Mandurah website.

Applications or changes to submitted applications will not be accepted after 17 March 2025.

Discuss your project with a City Officer

To be eligible for funding, you must discuss your project with a City of Mandurah Community Development team member to ensure your project aligns with key priority areas and fits within grant guidelines.

Dependent on your project type you should reach out to a Senior Community Development Officer or the Grants and Funding Officer.

To discuss your Community Grant application, please call **9550 3649** or email hcc@mandurah.wa.gov.au.

Have you dis	cussed the
application v	vith a City
Officer? *	

YesNo

Please record support ticket number. *

A number will be supplied by the Community Development team on contact. Do not construe discussions as an approval of this grant.

Name of City Officer *			
How did you hear about this fund? *	☐ Facebook☐ Twitter	☐ Media Release☐ Newspaper editorial	☐ City ofMandurah event☐ Previous Cityof Mandurah grant
	□ Newspaper advertisement□ Emails out to networks	☐ Flier ☐ Posters	recipient Grant Guru Other:
Applicant Details * indicates a required field			
Organisation Details			
Please note: If you are NOT an your personal details here and su For further information on auspic Development Officer.	upply the details of	an auspicing organi	sation on page 3.
Organisation Name *			
Is your group an incorporated not-for-profit group? *	required to find an ir your application. Aus		auspice (support)
Please attach	Attach a file:		
your certificate of incorporation. Auspiced			
applicants must attach the auspice's certificate *			
Organisation Postal Address *	Address		
	Suburb State	Postcode	
Organisation Website	Must be a URL		

_			
		ovided will be used to lo . Click Lookup above to	
		ABN correctly.	eneck that you have
	Information	from the Australian Busine	ess Register
	ABN		
	Entity name		
	ABN status		
	Entity type		
	Goods & Ser	vices Tax (GST)	
	DGR Endors	ed	
	ATO Charity	Type M	ore information
	ACNC Regist	tration	
	Tax Concess	sions	
	Main busine	ss location	
	Must be an A	BN	
Does your organisation have current Public Liability Insurance? *	□ Yes □	No	
	Public Liability Insurance is the applicant's responsibility and is part of an organisations risk management approach to its activities		
		ty and is part of an orga	nisations risk
Please attach Public		ty and is part of an orga nt approach to its activi	nisations risk
Liability Insurance	manageme	ty and is part of an organt approach to its activite:	nisations risk ties
	Attach a file	ty and is part of an orga nt approach to its activi	nisations risk ties
Liability Insurance Certificate of Currency. *	Attach a file	ty and is part of an organt approach to its activite: a: have an auspice, please at	nisations risk ties
Liability Insurance	Attach a file	ty and is part of an organt approach to its activite: a: have an auspice, please at	nisations risk ties
Liability Insurance Certificate of Currency. * What are your organisations usual	Attach a file Note: If you hauspice's ins	ty and is part of an organt approach to its activite: a: have an auspice, please at	tach proof of your
Liability Insurance Certificate of Currency. * What are your organisations usual	Attach a file Note: If you hauspice's ins Give a brief corganisation.	ty and is part of an organt approach to its activities: a: have an auspice, please at urance policy by erview of the history / m	tach proof of your
Liability Insurance Certificate of Currency. * What are your organisations usual activities? *	Attach a file Note: If you hauspice's ins Give a brief corganisation.	ty and is part of an organt approach to its activities: a: have an auspice, please at urance policy by erview of the history / m	tach proof of your
Liability Insurance Certificate of Currency. * What are your organisations usual activities? * Applicant Contact Details	Attach a file Note: If you hauspice's ins Give a brief corganisation.	e: nave an auspice, please at urance policy overview of the history / m. (Must be no more than 10)	tach proof of your ission / purpose of the 00 words)
Liability Insurance Certificate of Currency. * What are your organisations usual activities? * Applicant Contact Details	Attach a file Note: If you hauspice's ins Give a brief corganisation.	e: nave an auspice, please at urance policy overview of the history / m. (Must be no more than 10)	tach proof of your ission / purpose of the 00 words)

Phone Number/s *			
Email Address *			
Secondary Contact			
Secondary Contact Person *		First Name an alternative contacts ass n. Please list a contact who	
Position *			
Phone number/s			
Email Address *			
Auspice Organisation De * indicates a required field	WHAT IS A If your group incorporated your grant a required to All other asp	N AUSPICE? p is not incorporated, the dorganisation is needed application. If successful invoice and receive the pects of running the pro	I to Auspice (support) , the auspice will be funding on your behalf.
Name of Auspicing	be the appn	cant's responsibility.	
Organisation *			
Contact Name *	Title Name of the	First Name administrative contact in t	Last Name he Auspicing Organisation
Postal Address *	Address Suburb St	ate Postcode	

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Must be an Australian post code

Auspic	e Organ	isation
ΔRN *		

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Busi	ness Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	
Must be an ABN	

Auspice Contact Email Address *

Phone Number *

Must be an Australian phone number

Project Details

* indicates a required field

Project or Event Name *

Must be no more than 8 words. Must be no more than 6 words

Project Location *

Estimated Start Date *

Date of event or when project starts. This must be at least 3 weeks after the grant close date. Retrospective funding is not available.

Estimated End Date *	
	Date of event or when project ends
Project Description *	
	Must be no more than 200 words. Provide a brief overview of project. Include planned activities, where, when and who is involved.
Has your organisation applied for a City of Mandurah grant in the past 12 months? *	○ Yes ○ No
Does your organisation have any current grant funding agreements with the City of Mandurah? *	□ Yes □ No
If yes, please provide the application number	
Has your organisation received any other financial OR non-financial support from the City of Mandurah in the last 12 months? *	 None Fee Waiver Subsidised Venue Space Utility Bills Building Maintenance Garden Upkeep Other:
Estimated value of City of Mandurah support	
provided in the last 12 months *	If you answered 'no', please write NA.
Do you have any outstanding acquittals with the City of Mandurah? *	
Project rationale: Why do you think this project is needed in Mandurah?	
*	Word count: Describe the specific issue or need you want to address (150 words recommended)

What are the expected outcomes of the project? What will be achieved? *		the project to achieve in terms of others (150 words recommended)
How will you know if these outcomes have been achieved? *	Doscribo throo changes you will	I see if the expected outcomes of
	the project occur (150 words re	
How do you plan to evaluate the sucess of your project *	 □ Photos of project □ Brief survey of participants □ Qualitative Interviews □ Numbers on attendance records □ Group interview / discussion 	 □ Stories of "Most Significant Change" □ Recorded observation of activity / participation □ Phone Interviews □ Participant self rating scales □ Portfolio of work done
How does your project m	eet the funding objecti	ves?
	To be successful, application Community Grants Program the funding objectives.	ns in the City of Mandurah must meet at least one of 1 of
Please select the funding objective(s) that your proposed project will meet? *	vulnerable communities Build capacity of commuresident associations Increase volunteering, in Improve access to technological training Celebrate and encourage inclusion Create opportunities for (within allowed government)	acluding capacity and training ology for education and e cultural diversity and social localised smaller scale events restrictions ecially initiatives that build ship initiatives isilience through Arts &
Please list the ways that your project meets the funding objectives selected. *	Word count:	

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Must be no more than 150 words.

	Please list the aims / objectives; How does this benefit the community? Is there a specific need or issue that your project will address?		
What experience does your organisation have in delivering projects?	Word count:		
	word count:		
How many volunteers will be involved in	□ 0-3 □ 4-6	□ 11-15 □ 16-20	□ 21+ □ Other:
delivering this project? *	☐ 7-10 All applicants must a	answer this question	
Does your organisation work or volunteer with children? *	○ Yes○ No		
If yes, do you confirm that all relevant staff and volunteers have current Working with Children Checks	YesNo		
Do any City of Mandurah Elected Members or City Officers serve on your committee or actively engage in your organisation? *	○ Yes○ No		
If yes, please provide their name and role.			
Accessibility for All			
	and inclusion and community for all.	•	
	Please review the <u>here.</u>	2021 to 2026 Acces	ss and Inclusion Plan
	Please <u>click here</u> to Projects and Event		o Creating Accessible
I have read and understand the intention of these documents *	○ Yes	○ No	

Tick which access features you will consider in your activities *	☐ Wheelchair ramps to front door☐ Wheelchair accessible toilets	on fliers ☐ Flyers have appropriate font. font size and colour contrast
	☐ Accessible parking bays near venue	☐ Digital flyers are accessible to assistive technology users
	☐ All steps have handrails	☐ Written material available in alternative format
	☐ Venue has good lighting	☐ Doorways width is 850mm or wider for wheel chair accessibility
	☐ Venue has clear signage	☐ Access pathways are even, continuous and accessible
	□ Venue has audio loop or good sound system□ Translation services available	□ Other:
Project Budget		
* indicates a required field		
Other Project Income		
Don't insert a '\$' sign or comma	s to numerical fields. This will	be done automatically.
List all streams of income for (e.g fund raising, donations of grant funding sources). If the other funding sources please List income as GST exclusive.	or other ere are no	
LIST IIICOITIE AS GST EXCIUSIVE.	<u> </u>	
	\$ \$	
Total Grant Amount Requested from the City of Mandurah		
Total Grant Amount Requested *	\$ Must be a dollar amount. What is the total financial supporapplication?	ort you are requesting in this
Total Project Cost *	\$ Must be a dollar amount.	

What is the total budgeted cost (dollars) of your project?

Expenditure of City of Mandurah Grant

Please ensure your listed expenses match the approved items on the 'what we WILL fund' list in the grant guidelines available <u>here</u>. For example, we do not fund contingency or ongoing operational costs, e.g., base salaries, rent, insurance, administration, utilities.

List all expenses to be covered by City of\$ Mandurah grant funding

\$
\$
\$

Provide Quotes

Attach quotes that reflect the expenditure listed above for the City of Mandurah grant requested.

Attach quotes *	Attach a file:

Project Support

For projects to be successful they often require support from within your group as well as external to it.

Please list all non-monetary in-kind support (e.g. donations of goods, donations of time such as professional expertise and volunteer labour, steering committee involvement and support from, or partnership with, other organisations).

Examples:

- Committee of 5 volunteers will meet fortnightly to progress the project for the next 3 months.
- Donation of a Fridge by "XYZ company" valued at \$900
- "ABC Accountancy" volunteering expertise to manage the project budget x 10 hours - estimated value \$1000.
- Committee members will paint the fencex 6 hours
- "Department of BFF"are assisting with providing venue for free and are part of the organising committee

List	donations	of	time
and	goods		

	Word count: Must be no more than 150 words. any voluntary donation to your project Please attach any supporting documents such as Letters of Support or minutes of meetings that show support for your project. Click on the "Browse / attach a file" button and then specify which file on your computer you wish to upload.		
Attached documents	Attach a file:		
Project Promotion and M * indicates a required field	1arketing		
Which of the following will you use to promote and market your project? *	□ Facebook □ Newspaper editorial □ Twitter □ Flier □ Newspaper advertisement □ Posters □ Emails out to networks □ Street Signage □ Media Release □ Pull up banner choose as many as required		
	Acknowledging the City of Mandurah		
	It is a condition of this grant that recipients acknowledge the City of Mandurah's support and contribution in promotional materials, media releases or other public documents relating to the project or event including, where possible, invitation to formal openings etc.		
	The City's logo may be used where appropriate and with prior approval by the City of Mandurah. To obtain the appropriate logos and branding guidelines for the City of Mandurah, please contact https://doi.org/10.1001/journal.new.gov.au		
	Thinking about your project, what ways could you acknowledge the City of Mandurah?		
*	 □ Written acknowledgement □ Acknowledged by Emcee at events □ Plaque or Naming Rights □ Acknowledge in event media release 		

	☐ Label Equipment	 Display City of Mandurah banner
	☐ Acknowledged in newsletters☐ Reference in Meeting Minutes	□ Other:
I certify that:	knowledge, true and cor	plication is, to the best of my rect. On behalf of the applicant pted and agree to the Community is.
		d all relevant fields please click ns can be made after the round
	platform confirming rece reserves the right to reje not meet the eligibility c information. All applican	otification from the SmartyGrants eipt of application. The City ect any application that does riteria and/or to request further ts are notified of the panel n six weeks of the round's closing