Matching Grant

All community groups MUST discuss their ideas and options with the Community Capacity Building Officer, especially those seeking funds for the first time, on 9290 6678. The grant may not proceed if these discussion have not been held prior to the application being made.

Grants are awarded up to a maximum of \$2000. Groups must be able to match Shire funding dollar for dollar, for grants over \$1000. For grants under \$1000 in-kind support can be used for matching purposes.

Partnerships where two or more community groups will benefit directly from the grant activity are encouraged.

Matching Grants Eligibility Criteria:

- Incorporated not-for-profit organisation based in the Shire of Mundaring;
- Parents and Citizen's Association based in the Shire of Mundaring;
- Un-incorporated community group under the auspices of an Incorporated organisation.
- Previous Matching grants must be acquitted before a new application can be made.
- Retrospective requests will not be funded.

Value of Grant: \$2000 maximum

What is Funded: Projects

- Equipment;
- Minor capital upgrades;
- Promotional material;
- Training.

Please note funding from this grant cannot be used for community events. The Shire's Community Event grant is available to support community events.

Required Documentation

To complete your application you will need:

- Your ABN or an ATO Statement by Supplier Form if you do not have an ABN;
- The bank details of your organisation or your auspicing organisation;
- A project timeline;
- A detailed budget;
- Contact details of a referee.

Please refer to the <u>Grant Guidelines</u> for further information and to ensure you are eligible and to view eligible and non-eligible items, prior to completing your application.

Applic	ant Det	ails				
* indicates a required field						
Organi	sation [Details				
Organis	ation Na	me *				
Street A Address	Address *					
		_				
Suburb	State	Postcode				
Postal <i>A</i> Address	Address					
Suburb	State	Postcode				
Phone N	Number *					
Email A	ddress *					
O Yes O No	organisat	tion Incorpora	ted? *			
If you h	ave an A	BN please con	plete her	e		
		will be used to ve entered the A			nation.	Click Lookup above to
Informati	on from the	e Australian Busir	ess Registe	r		
ABN						
Entity na						
ABN state						
Entity typ		(0.07)				
Goods &	Services Ta	ax (GST)				

DGR Endorsed			
ATO Charity Type	More inform	ation_	
ACNC Registration			
Tax Concessions			
Main business loca	ation		
	nave an ABN please comp ow or 48.5% of any appro		
ATO Statement Attach a file:	by Supplier Form		
Applicant Prima Account Name	ary Bank Account *		
DCD Name by a se	A a a a control Normalia a co		
BSB Number	Account Number		
Must be a valid Aus	stralian bank account format.		
Auspice Cont	act Details		
	d community group can only ner incorporated organisatio		ey do so under the
	organisation will be respons d directly to the bank accou		
	oility of the incorporated org onditions of the auspicing a		cant to negotiate and
Auspice Name * Organisation Nan			
_			
Auspice ABN *			
	d will be used to look up the ave entered the ABN correct		Click Lookup above to
Information from t	he Australian Business 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 Primary Address * Address	
Auspice Primary Phone Numb	er *
Must be an Australian phone number	
Auspice Primary Email *	
Must be an email address.	
Auspice Primary Bank Account Account Name	t *
BSB Number Account Number	er
Must be a valid Australian bank accor	unt format.
Contact Person Details	
Who is the best person to speak t	to about this application?
Contact Person * First Name Last	: Name
Position in your organisation	*
<u>.</u>	
Contact Phone Number *	
Contact Email *	

Organisation Details * indicates a required field Your Organisation What is the primary purpose of your organisation? * Must be no more than 50 words **President Name *** First Name Last Name Source(s) of Income * ☐ Membership Fees □ Fundraising □ Grants/Sponsorships ☐ Other: Must be at least 1 choice selected When was your organisation established? * Number of Paid Staff (if any) ? Who owns the premises from which you Must be a number Please provide an estimate of how many Do you require approval from the owner to undertake the proposed project? * members reside in Shire of Mundaring Number of members/volunteers? * ○ No Must be a number. Must be a number Organisation alignment with Shire's Strategies Identify how the project/event aligns with the Shire's Council Plan 2024-2034 □ 1.1. Protect and enhance natural habitats, □ 6.3. Increase access to safe, affordable including nature reserves, rivers, lakes and and diverse housing options waterways, to support wildlife conservation and recreational activities ☐ 2.1. Adopt sustainable practices to □ 7.1. Support the development of vibrant, manage climate change, including growing attractive and welcoming town centres and local hubs the urban forest, reducing emissions, and saving water □ 2.2. Adopt sustainable waste management □ 7.2. Facilitate attractive, well-maintained practices to strive for zero waste streetscapes and verges ☐ 2.3. Build resilience to cope with natural ☐ 7.3. Provide fit for purpose community

disasters and emergencies, including storms, buildings and public facilities

flooding and fire

 □ 3.1. Promote our diverse cultures, history and heritage □ 3.2. Grow participation in arts, culture and community events □ 4.1. Facilitate improved community safety □ 4.2. Promote community health and wellbeing 	 □ 7.4. Enhance public open space, parks and playgrounds □ 8.1. Maintain a safe, efficient road and transport network with supporting infrastructure and services □ 8.2. Provide safe, well-connected trails, paths and bike lanes □ 9.1. Support local businesses to prosper
 □ 4.3. Grow participation in sport and recreation activities □ 4.4. Encourage responsible animal ownership □ 5.1. Advance opportunities, community participation and quality of life for people of all ages and abilities □ 5.2. Grow participation in volunteering □ 6.1. Promote responsible planning to meet current and future needs 	 □ 9.2. Support the growth of sustainable tourism □ 9.3. Grow participation in education and life-long learning □ 10.1. Strengthen organisational culture, governance, financial management and asset management □ 10.2. Enhance the customer experience □ 10.3. Effectively inform and engage the community about local issues, facilities, services and events
☐ 6.2. Preserve and promote local heritage buildings and places of interest See the Shire's Council Plan here	
	gns with the Shire's Community Health &
Wellbeing Informing Strategy 2020/2025 ☐ Objective 1: Increase awareness and knowledge about activities that strengthen and retain mental health and wellbeing	☐ Objective 13: Manage and maintain the risks associated with infectious disease
 □ Objective 2: Increase participation in activities that yield mental health benefits □ Objective 3: Minimise the risk of harm from falls 	☐ Objective 1: Manage and control risks associated with emergency events ☐ Objective 2: Enhance bush fire preparedness
☐ Objective 4: Increase awareness of road safety campaigns	☐ Objective 3: Protect the community by managing safety of public buildings, recreation facilities and events
☐ Objective 5: Increase water safety awareness and minimise associated risks	☐ Objective 4: Support people with disability and their families, friends and carers to feel welcomed, valued and included in the Shire community
☐ Objective 6: Facilitate a more active community by increasing participation in physical activity	☐ Objective 5: Minimise congestion and advocate for improved public transport
☐ Objective 7: Foster healthy eating in our community	☐ Objective 6: Engage with and support our young people and wider community to become more connected
☐ Objective 8: Prevent harms associated with smoking, alcohol and drugs in the community ☐ Objective 9: Engage older people to participate in activities and events	n□ Objective 7: Maintain and enhance
☐ Objective 10: Strengthen access to facilities, services and information for older people	☐ Objective 9: Identify health risks and adaptation options for climate change impacts

 □ Objective 11: Facilitate appropriate housing for older people □ Objective 12: Promote, raise awareness 	☐ Objective 10: Facilitate sustainable land use and development
and increase knowledge about immunisation See the Shire's Community Health & Wellbeing Inf	
Project Details	
* indicates a required field	
Your Project	
Project Title *	
What are the primary areas of focus for	this project/program? *
Only select sub-categories if you want to be more	ems from any area of the list – all have equal value. specific. In this question we want to know about th the types of people it will affect (e.g. young people
Short project description *	
Word count:	
Consider who, what, when and where. Include a ra Must be at least 50 words.	ationale - why does this work need to be done now?
Who are the expected primary beneficia	ries of this project/program? *
Please choose only the group/s that are at the ver	ay core of this project/program. If your initiative is
open to everyone, choose the first item, 'Universa	
What consultation did the group undert	
community regarding their support for t	the project? *
Word count: Must be at least 50 words	
What are the planned activities? Please	provide a timeline for the project *
-	. ,
Word count:	

Must be at least 50 words. Consider how you will implement and who will be responsible for tasks.

Start date for the project *
Must be a date. Can be an estimate.
End date for the project *
Must be a date. Can be an estimate.
How does your group plan to match the Shire funding? *
List other sources of funding including other grants, sponsorship, fundraising, own funds including the amounts
Have these sources of income been confirmed? *
○ Yes○ No
How will the group acknowledge the Shire of Mundaring contribution? * Social media posts Newspaper advertising Media release Banners Posters Website Other:
Please note this is a condition of the grant. Evidence of this support is required for successful applicants at the acquittal stage.
Supporting Documentation
Please upload any other documents that may support your application Attach a file:
Evaluation
* indicates a required field
Project Evaluation
What are the expected outcomes of the project? *
Word count:

Must be at least 50 words.

How will the group know if these outcomes have been achieved? *

Word count:

How will you evaluate whether you have achieved your goals? Provide specific examples eg feedback survey, observation. Must be at least 50 words

Budget

* indicates a required field

Amount Requested

What is the total amount you are requesting from Shire of Mundaring.

Total Amount Requested

\$

Must be a dollar amount and no more than 2000. To be no more than 50% of total project cost to a maximum of

Budget

Please show the value of this grant in the income section, along with any other funds you will put towards the project or seek from other sources.

Please show the value of all expenditure related to the project in the expenditure section, not just those items covered by this grant.

The total income and total expenditure should balance.

Please note this budget is your project budget only, not your organisational annual budget.

Registered for Goods and Services Tax

If the group is registered for GST you must show expenditure items exclusive of the GST component. For example, you have been quoted \$550 including GST for lighting hire. In your expenditure budget you would only show lighting hire of \$500. If the activity is funded, the payment will include a 10% GST component.

Not registered for Goods and Services Tax

If the group is not registered for GST you must show expenditure items inclusive of the GST component. For example, you have been quoted \$550 including GST for lighting hire. In your expenditure budget you would show lighting hire of \$550. If the activity is funded, the payment will include the GST component for those items on which GST is payable.

Income Income Confirmed ExpenditureExpenditureGST Quotes for description amount funding description Amount amount (if expenses applicable) over \$500

e.g. WA Govt. Culture and Arts Grant, Lotterywest grant		a dollar	a dollar	Required for purchases over \$500

In Kind Support

In kind support captures services or equipment that can be used by the organisation or individual in lieu of a financial income amount. An example might be hall hire or BBQ use for an event, or volunteer hours.

Please attribute a dollar amount below with a description of any in kind support for this application.

In kind support description	Confirmation	
	Must be a dollar amount.	
		<u> </u>

Budget Totals

Total Income Amount	Total Expenditure Amount	Total In Kind Amount
\$	\$	\$
This number/amount is	This number/amount is	This number/amount is
calculated.	calculated.	calculated.

Referee

Please note: The referee is someone who is familiar with your organisation, its members and operation however **cannot be a member of your organisation, its Committee or Board or a paid employee.** Shire Councillors and staff cannot be used as referees on grant applications.

Name *	First Name	Last Name	
Position			
Organisation Name *			
Primary Phone Number *			

^{*} indicates a required field

Declaration

I have read and agree to

If your application is successful and the project proceeds, approval of funding does not, in any way, exclude applicants from having to obtain the appropriate permits, consents or approvals required by the Shire's planning, building or health services.

I understand that I may be required to supply further information prior to consideration of this application, and should the organisation be successful in gaining funding a copy of a recent bank statement demonstrating our ability to match the requested funds will be required.

I understand that should the application be successful an acquittal report will be submitted to the Shire of Mundaring within three months of the project finishing.

I understand that monies received as a result of this application must be used in accordance with the <u>Shire of Mundaring's Policies</u> and <u>Council Plan 2024-2034</u> and the <u>Community Grant Funding Guidelines</u>.

I understand that any variations to the original request for funding will need to be addressed to the Manager Libraries, Communications and Engagement at the Shire of Mundaring.

Yes, I have read and agree

I am authorised to make this application on behalf of the organisation I represent. The information given is true and correct.

the above: *	 No, I do not agree 			
Authorised Person *	Title	First Name	Last Name	
Position *				
Date *				
Feedback				
Applying for a Matching G	Grant			
We would appreciate your feedbar Please take a moment to answer			r Matching Grant.	
If you would like to provide more detailed feedback please contact the Community Capacity Building Officer on 9290 6678 or ccbo@mundaring.wa.gov.au.				
How did you find out about this grant opportunity?	□ Social M□ Shire W□ Commu	ebsite nity Noticeboard ewspapers		

	☐ Email from Shire☐ Other:
	To what extent do you agree with the following statements about this grant opportunity?
The grant application process was clear and straight-forward	 Strongly agree Agree Neutral Disagree Strongly Disagree
It was easy to find out about previously funded projects	 Strongly agree Agree Neutral Disagree Strongly Disagree
Support from Grants Administrators was helpful, respectful and timely	 Strongly agree Agree Neutral Disagree Strongly Disagree
Do you have any comments or feedback to share with us about the application process?	