

# 2024 Matching Grant Application Form Round Two

## Form Preview

### 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 [Grant Guidelines](#) for further information and to ensure you are eligible and to view eligible and non-eligible items, prior to completing your application.

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## Form Preview

### Applicant Details

\* indicates a required field

#### Organisation Details

**Organisation Name \***

**Street Address \***

Address

  

Suburb    State    Postcode

        

**Postal Address**

Address

  

Suburb    State    Postcode

        

**Phone Number \***

**Email Address \***

**Is your organisation Incorporated? \***

- ☐ Yes  
☐ No

**If you have an ABN please complete here**

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 Business Register
ABN
Entity name
ABN status
Entity type
Goods & Services Tax (GST)

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## Form Preview

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

**If you DO NOT have an ABN please complete an [ATO Statement by Supplier](#) form and attach below or 48.5% of any approved grant may be withheld.**

### ATO Statement by Supplier Form

Attach a file:

### Applicant Primary Bank Account \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

## Auspice Contact Details

An unincorporated community group can only apply for funding if they do so under the auspices of another incorporated organisation.

The incorporated organisation will be responsible for receiving and managing the funds. Funds will be paid directly to the bank account of the incorporated organisation.

It is the responsibility of the incorporated organisation and the applicant to negotiate and agree upon the conditions of the auspicing arrangement.

### Auspice Name \*

Organisation Name

### Auspice ABN \*

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 Business Register

ABN

Entity name

ABN status

Entity type

Goods & Services Tax (GST)

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## Form Preview

DGR Endorsed
ATO Charity Type <a href="#">More information</a>
ACNC Registration
Tax Concessions
Main business location

Must be an ABN.

**Auspice Primary Address \***

Address

  

**Auspice Primary Phone Number \***

Must be an Australian phone number.

**Auspice Primary Email \***

Must be an email address.

**Auspice Primary Bank Account \***

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

## Contact Person Details

Who is the best person to speak to about this application?

**Contact Person \***

First Name

Last Name

**Position in your organisation \***

**Contact Phone Number \***

**Contact Email \***

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### 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) \***

Must be a number

**Who owns the premises from which you operate? \***

**Please provide an estimate of how many members reside in Shire of Mundaring \***

Must be a number.

**Number of members/volunteers? \***

Must be a number

**Do you require approval from the owner to undertake the proposed project? \***

- ☐ Yes  
☐ No

#### Organisation alignment with Shire's Strategies

**Identify how the project/event aligns with the Shire's Council Plan 2024-2034**

- |  |  |
|--|--|
| <input type="checkbox"/> 1.1. Protect and enhance natural habitats, including nature reserves, rivers, lakes and waterways, to support wildlife conservation and recreational activities | <input type="checkbox"/> 6.3. Increase access to safe, affordable and diverse housing options                          |
| <input type="checkbox"/> 2.1. Adopt sustainable practices to manage climate change, including growing the urban forest, reducing emissions, and saving water                             | <input type="checkbox"/> 7.1. Support the development of vibrant, attractive and welcoming town centres and local hubs |
| <input type="checkbox"/> 2.2. Adopt sustainable waste management practices to strive for zero waste  | <input type="checkbox"/> 7.2. Facilitate attractive, well-maintained streetscapes and verges                           |
| <input type="checkbox"/> 2.3. Build resilience to cope with natural disasters and emergencies, including storms, flooding and fire   | <input type="checkbox"/> 7.3. Provide fit for purpose community buildings and public facilities                        |

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- ☐ 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
  - ☐ 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
  - ☐ 6.2. Preserve and promote local heritage buildings and places of interest
- See the Shire's Council Plan [here](#)
- ☐ 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
  - ☐ 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

### Please identify how the project/event aligns 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 2: Increase participation in activities that yield mental health benefits
- ☐ Objective 3: Minimise the risk of harm from falls
- ☐ Objective 4: Increase awareness of road safety campaigns
- ☐ Objective 5: Increase water safety awareness and minimise associated risks
- ☐ Objective 6: Facilitate a more active community by increasing participation in physical activity
- ☐ Objective 7: Foster healthy eating in our community
- ☐ Objective 8: Prevent harms associated with smoking, alcohol and drugs in the community
- ☐ Objective 9: Engage older people to participate in activities and events
- ☐ Objective 10: Strengthen access to facilities, services and information for older people
- ☐ Objective 13: Manage and maintain the risks associated with infectious disease
- ☐ Objective 1: Manage and control risks associated with emergency events
- ☐ Objective 2: Enhance bush fire preparedness
- ☐ Objective 3: Protect the community by managing safety of public buildings, recreation facilities and events
- ☐ Objective 4: Support people with disability and their families, friends and carers to feel welcomed, valued and included in the Shire community
- ☐ Objective 5: Minimise congestion and advocate for improved public transport
- ☐ Objective 6: Engage with and support our young people and wider community to become more connected
- ☐ Objective 7: Maintain and enhance environments supportive of public health
- ☐ Objective 8: Build capacity for safe and sustainable water management by shire and community
- ☐ Objective 9: Identify health risks and adaptation options for climate change impacts

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- ☐ Objective 11: Facilitate appropriate housing for older people
- ☐ Objective 12: Promote, raise awareness and increase knowledge about immunisation

- ☐ Objective 10: Facilitate sustainable land use and development

See the Shire's Community Health & Wellbeing Informing Strategy [here](#)

## Project Details

\* indicates a required field

### Your Project

#### Project Title \*

#### What are the primary areas of focus for this project/program? \*

You may select up to five items. You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

#### Short project description \*

#### Word count:

Consider who, what, when and where. Include a rationale - why does this work need to be done now? Must be at least 50 words.

#### Who are the expected primary beneficiaries of this project/program? \*

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'

#### What consultation did the group undertake with its members or the wider community regarding their support for 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.

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### 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:



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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 \$2000.

## 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 description	Income amount	Confirmed funding	Expenditure description	Expenditure Amount	GST amount (if applicable)	Quotes for expenses over \$500
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e.g. WA Govt. Culture and Arts Grant, Lotterywest grant	Must be a dollar amount.			Must be a dollar amount.	Must be a dollar amount.	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 In kind support amount Confirmation

	Must be a dollar amount.	

### Budget Totals

#### Total Income Amount

\$

This number/amount is calculated.

#### Total Expenditure Amount

\$

This number/amount is calculated.

#### Total In Kind Amount

\$

This number/amount is calculated.

### Referee

\* indicates a required field

**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 \*

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### Declaration

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 [Shire of Mundaring's Policies](#) and [Council Plan 2024-2034](#) and the [Community Grant Funding Guidelines](#).

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.

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

**I have read and agree to the above: \***

- ☐ Yes, I have read and agree  
☐ No, I do not agree

**Authorised Person \***

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Position \***

**Date \***

### Feedback

#### Applying for a Matching Grant

We would appreciate your feedback on the application process for our Matching Grant. Please take a moment to answer the following questions.

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](mailto:ccbo@mundaring.wa.gov.au).

**How did you find out about this grant opportunity?**

- ☐ Volunteer Newsletter  
☐ Social Media  
☐ Shire Website  
☐ Community Noticeboard  
☐ Local Newspapers  
☐ Word of Mouth

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- ☐ 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?**