

2024-2025 Milestone Event Grant Application Form

Form Preview

Grant Guidelines

* indicates a required field

Each year, one local organisation that has reached a major milestone in its history or development will be provided \$2500 by Council, to assist in holding a major recognition event for its members.

Your application must address the following criteria:

- The contribution your organisation is making towards the event
- How the event will benefit members
- The consultation that took place with members to determine their level of support for the event
- How the Shire's contribution will be recognised
- How the success of the event will be measured

To complete your application, you will need:

- To have applied for an [Event Permit](#);
- A detailed budget (with quotes for items over \$500)
- 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; and
- A detailed budget.

In addition, please ensure you have determined the need for additional toilet facilities for your event and have incorporated the hire expenses into your budget. Please contact Shire Health Services on 9290 6742 to discuss and note the details in your application.

It may be useful to view the [Organising Events](#) page on the Shire's website for assistance in planning your event.

For further information regarding eligibility criteria please refer to the full [Grant Guidelines](#) or contact the Community Capacity Building Officer on 9290 6678 or ccbo@mundaring.wa.gov.au.

Have you submitted an Event Permit Application? *

- Yes
 No

Funding may be withdrawn, withheld, or may need to be returned to the Shire if the necessary steps are not taken to obtain the required approvals. To start the approval process please complete the Event Permit Application at <https://my.mundaring.wa.gov.au/EventsOnlineForm>

Organisation Details

2024-2025 Milestone Event Grant Application Form

Form Preview

Organisation Name *

Street Address *

Address

Postal Address

Address

Suburb State Postcode

Must be an Australian post code

Phone Number *

Must be an Australian phone number.

Email *

Must be an email address.

Is your organisation Incorporated? *

- Yes
 No

If YES what is your Incorporation Number?

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)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN. Supply the ABN of the auspice if applicable

2024-2025 Milestone Event Grant Application Form

Form Preview

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

ATO Statement by Supplier Form

Attach a file:

Bank Details

Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Contact Details

Contact Name *

First Name

Last Name

Position in your organisation *

Primary Phone Number *

Must be an Australian phone number

Contact Email *

Auspice Details

If your organisation is **NOT Incorporated** please provide the details of your auspice below, including contact details, ABN and banking details.

More information about auspice arrangements can be found [here](#).

Auspice Contact

Individual Organisation

Organisation Name

Title

First Name

Last Name

Auspice Address

2024-2025 Milestone Event Grant Application Form

Form Preview

Address

Auspice Email

Must be an email address.

Auspice Phone Number

Must be an Australian phone number.

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)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Auspice Bank Account

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Your Organisation

What is the primary purpose of your organisation? *

2024-2025 Milestone Event Grant Application Form

Form Preview

When was your organisation established?

Number of members/volunteers *

Please estimate the number of members who are Shire of Mundaring residents *

Who owns the premises from which you operate? *

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

- Yes
 No

Project Details

* indicates a required field

Event Title *

Please provide a detailed description of the proposed event *

Must be at least 50 words

Date of Event *

Must be a date.

How many people do you expect to attend the event? *

What specifically, will you use the grant funds for? *

2024-2025 Milestone Event Grant Application Form

Form Preview

What items will the funding pay for?

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)

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'

How will members of your organisation benefit from the event? *

Must be between 50 and 100 words

What consultation did you undertake with members of your organisation regarding their support for the event? *

Must be at least 25 words

How do you plan to address issues of Access and Inclusion? *

To ensure that you have adequately addressed Access and Inclusion for your event, please complete the [Accessible Events Checklist](#).

Which of the following promotional activities will take place? *

- Social media
- Newspaper advertising
- Media release
- Banners
- Posters
- Website
- Verbally at event
- Other

At least 3 choices must be selected. These are the tools you will use to promote your event.

How will the group acknowledge the

- Social media
- Website
- Media release

2024-2025 Milestone Event Grant Application Form

Form Preview

Shire of Mundaring contribution?

- Newsletter
- Shire logo on all promotional material (required)
- Shire banners at event (required)
- Invitation to Councillor to attend (required)
- Other:

Evaluation

* indicates a required field

What are the expected outcomes of the project? *

What do you hope to achieve?

How will you know if these outcomes have been achieved? *

In what ways will you evaluate whether you have achieved your goals? Describe the ways in which you will gather evidence.

Attachments

If necessary, additional information can be attached here

Attach a file:

Budget

* indicates a required field

Budget

Please include income and expenditure for the event only, not your organisations total operating budget.

Include only the income that will be used to cover your expenditure for the event. Income can include:

- this grant
- other grants
- the organisation's own funds
- business sponsorship
- donations

Include all costs associated with running the event in the expenditure section. For expense items over \$500 please provide quotes in the upload area below.

2024-2025 Milestone Event Grant Application Form

Form Preview

The income and expenditure totals should match and show how you will expend the \$2500 grant.

Registered for Goods and Services Tax

If you are registered for GST you must show your 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 show lighting hire of \$500. If your activity is funded, the payment will include a 10% GST component.

Not registered for Goods and Services Tax

If you are not registered for GST you must show your 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 your activity is funded, the payment will include the GST component for those items of which GST is payable.

Budget

Income	Amount	Expenditure	Amount
	Must be a dollar amount.		Must be a dollar amount.
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget Totals

Total Income Amount

Total Income Amount
\$

This number/amount is calculated.

Total Expenditure Amount

Total Expenditure Amount
\$

This number/amount is calculated.

Income-Expenditure

Income - Expenditure
\$

This number/amount is calculated.

Total Amount Requested *

\$

Must be a dollar amount.

What is the total financial support you are requesting in this application?

Quotes

Please upload quotes for items over \$500.

Quotes

Attach a file:

2024-2025 Milestone Event Grant Application Form

Form Preview

Declaration

* indicates a required field

I understand that I may be required to supply further information prior to consideration of this application.

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. 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 Milestone Event Grant

We would appreciate your feedback on the application process for our Milestone Event Grant. Please take a short 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.

How did you find out about this grant opportunity?

- Shire of Mundaring Volunteer Bulletin
 Social Media
 Shire website
 Community noticeboard
 Local newspapers
 Other:

2024-2025 Milestone Event Grant Application Form

Form Preview

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?