

# Volunteer Recognition Event Grant Application Form 2024

## Form Preview

### Grant Guidelines

\* indicates a required field

As a volunteer, sporting or other non-profit community organisation within the Shire of Mundaring, you are invited to apply to Council for funding of \$300 to assist in holding an event that recognises your group's volunteer contribution and their importance to the local community.

Council will receive applications for the funding of a Recognition Event at any time, however only one application per calendar year can be submitted.

Funding will not be provided for an event which is held before the application is approved.

This grant does not require an acquittal.

#### 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 detailed budget for your event.

**Please refer to the full [Grant Guidelines](#) for further information before proceeding with your application.**

### Contact Details

#### Organisation Name \*

#### Organisation Primary Address

Address

  

#### Organisation Postal Address

Address

  

#### Contact Person \*

First Name

Last Name

#### Position \*

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**Contact Phone Number \***

If a land line please put prefix, e.g. 0892906715

**Contact Email \***

**Does your organisation have an ABN? \***

☐ Yes

☐ No

Please provide ABN:

**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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

**If your organisation does not hold an ABN please complete the [Statement by Supplier](#) form and attach below.**

**Statement by Supplier \***

Attach a file:

## Banking Details

Please provide your banking details for ease of payment by EFT.

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### Applicant Primary Bank Account \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

## Event Details

\* indicates a required field

### Short project description \*

Must be at least 25 words

### 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 is this project/program of benefit to the target group? \*

Word count:

Must be at least 50 words.

### Date of event \*

### How will you recognise Shire of Mundaring's contribution? \*

### What financial contribution (if any) will your organisation make towards the event? \*

## Budget

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Income description	Income amount	Expenditure description	Expenditure Amount	GST amount (if applicable)
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.

### 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.

### Declaration

\* indicates a required field

### Acknowledgement

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

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

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**Position \***

**Date \***

## Feedback

### Feedback for a Volunteer Recognition Event Grant

We would appreciate your feedback on the application process for our Volunteer Recognition 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](mailto:ccbo@mundaring.wa.gov.au).

#### 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

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

- ☐ Volunteer Newsletter
- ☐ Social Media
- ☐ Shire Website
- ☐ Community Noticeboard
- ☐ Local Newspapers
- ☐ Word of Mouth
- ☐ Email from Shire
- ☐ Other:

#### Do you have any comments or feedback to share with us about the application process?