### Part A - Organisation Eligibility

\* indicates a required field

#### Strategic Projects Fund

## Before you begin please indicate your organisation's eligibility to apply for the Strategic Projects Fund.

The purpose of the Strategic Projects Fund is to strengthen not for profit organisations through the provision of financial support to upgrade existing or build new facilities where the organisation has suitable land tenure as defined in the supporting guidelines. This financial support will foster the development of accessible, fulfilling, and engaging places and spaces for wider community.

#### The fund aims to create conditions for community that can;

- Increase community participation, access and organisational sustainability through major upgrades or new facilities.
- Provide or build a facility that encourages a collaborative use of space.
- Create a safer, more accessible, and user-friendly facility for community.

#### The Strategic Projects Fund objectives are:

**Capacity:** The Capacity Objective aims to foster community led collaboration and partnerships, initiatives, programs and projects that help communities develop their own solutions to local areas of need. Initiatives and activities under this objective will generally strengthen and build the skills, knowledge, and capacity of community members and groups which can then be applied and shared. One of the key outcomes of the Capacity initiative is to advance the communities aspirations of collective action, co-operations, and shared goals.

**Connect:** The Connect Objective aims to foster community led initiatives and projects that strengthen relationships, community connection, civic participation and understanding across all sectors of the community.

**Wellbeing**: The Wellbeing Objective aims to foster healthy, safe, and supported communities through the delivery of community led partnerships, programs, activities, and resources that promote healthy lifestyles, positive wellbeing, and safe communities

| Please indicate the funding initiative your program, project or event aligns to:-  |
|--|
| □ Capacity □ Wellbeing □ Connect   |
| No more than 1 choice may be selected. While the project may align to multiple objectives, please select the ONE with the strongest alignment. |

#### Does your organisation identify with any of the following categories?

Your application will not be eligible to proceed to assessment if your organisation does not meet the funding eligibility requirements. Please indicate your organisation's eligibility in the checklist below;

| Must be | one | of the | follow | /ing: | * |
|---------|-----|--------|--------|-------|---|
|         |     |        |        |       |   |

 $\ \square$  a not-for-profit sporting club or active recreational group based in or servicing the Gladstone Regional Council area

| ☐ Be a not-for-profit community organisation based in or servicing the Gladstone Regional Council area (other than a sporting club).   |
|--|
| and must: *  ☐ have land tenure with Gladstone Regional Council where the project is to be carried out (ie lease or have a written license to use land - evidence is required);  ☐ obtain prior consent from Gladstone Regional Council for works to be undertaken (evidence is required). To request consent please email info@gladstone.qld.gov.au to obtain necessary documentation;  ☐ be able to make a 20% co-contribution of the total project cost;  ☐ have attended the Strategic Projects Fund education information session;  ☐ be incorporated  ☐ be financially solvent  At least 6 choices must be selected. |
| Does your organisation have an ABN? *  ○ Yes  ○ No  One must be selected to proceed. If you do not have an ABN you will need to submit a Statement by a Supplier form.   |
| 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.

## File Upload: Statement by a supplier form

You can access and download this form at the link below. Please attached the completed form to this application for processing.

http://www.ato.gov.au/uploadedFiles/Content/MEI/downloads/BUS38509n3346\_5\_2012.pdf

#### Statement by supplier form

Attach a file:

| File Upload: Lessor Consent                                   |
|---|
| Copy of Land Owner/Lessor Consent * Attach a file:            |
| File Upload: Financials                                       |
| <b>Evidence of 20% project co-contribution</b> Attach a file: |
|   |
| File Upload: Certificate of Incorpora                         |
| Certificate of Incorporation * Attach a file:                 |
|   |
| File Upload: Financials                                       |
| Most Recent Profit and Loss Statement Attach a file:          |
| Current Audited Financial Statement * Attach a file:          |
| Part B - Organisation Information                             |
| * indicates a required field                                  |
| Organisation Details  |
| Organisation Name * Organisation Name                         |
| Former Organisation Name *                                    |
|   |

Advise former name of organisation if there has been a name change.

| Physical Address * Address   |
|--|
|  |
|  |
| Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. |
| Postal Address * Address   |
|  |
| Address Line 1 Suburb/Town State/Drevines Desteads and Country, are required     |
| Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. |
| Contact Name * Title First Name Last Name  |
|  |
| Contact Position *   |
| Contact Fosition   |
| E.g. president, secretary, treasurer.  |
| Preferred Contact Number *   |
|  |
| Must be an Australian phone number.  |
| Preferred Email Address *  |
| Must be an email address.  |
| Please provide a brief summary of your organisation and its history/purpose *    |
| Please provide a brief summary of your organisation and its instory/purpose      |
|  |
|  |
|  |
| Part C - Project Details   |
| * indicates a required field   |
|  |
| Project Title *  |
|  |
| Address/ location of where the project will take place * Address                 |

| Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.  |
|---|
| Lot and Plan Number   |
| This can be found on the Landowner Consent Letter provided by Gladstone Regional Council.   |
| Tell us more  |
| Tell do more  |
| Is this a new project or a component of a staged project? *  ○ New ○ Component of a staged project  |
| When did the project start or when is it due to start?  |
| Must be a date.   |
| What is the expected project completion date?   |
| Must be a date.   |
| Provide a description of the project and what the project aims to achieve *   |
|   |
|   |
| Provide a short description (100 words recommended) of your project - what are you out to do?   |
| What is the need for the project and how has it been identified? *  |
|   |
| Hint: Why does this event need to happen? Is there an interest from the community for this event? Why does the town/region need this event to happen? |
| Is the project supported by other organisations / groups / stakeholders and what  |
| benefits will they receive? *   |
|   |
|   |

Go to the Funding Centre's Answers Bank at <a href="https://www.fundingcentre.com.au/answersbank#Qu7">https://www.fundingcentre.com.au/answersbank#Qu7</a> if you need some ideas about how to frame your response.

| If required has development approval for the project been obtained? *   |
|---|
| □ No To ascertain if DA (Development Approval) is required please contact Council's Development Services team on 4970 0700. Landowner consent does not mean DA approval has been granted. It is the applicant's responsibility to obtain DA approval if required. |
| Can the project be completed within eighteen (18) months of receiving the funding? *  Yes  No In other words, is this project shovel ready?   |

### Capacity Objective

The purpose of the Capacity objective is to encourage collaborations and partnerships that strengthen individuals, groups and organisations to prosper and grow.

The Capacity Funding objective aims to enable development and delivery of;

• Partnerships, projects, initiatives and activities that that strengthen our community and the Region.

### Connect Objective

The Connect objective enables the development and delivery of initiatives and projects that foster well connected communities through the provision of community led programs and activities

The Connect Funding objective aims to enable the development and delivery of;

• Programs and activities that increase community connection, civic participation and understanding across all sectors of the community.

## Wellbeing Objective

The purpose of the Wellbeing initiative is to enable the development and delivery of programs and initiatives that foster healthy, safe and supported communities.

The Wellbeing objective aims to provide financial and in-kind funding toward the development and delivery of;

• Community led partnerships, initiatives and projects that deliver programs, resources and activities that promote healthy lifestyles, positive wellbeing and safe communities.

## Strategic Project Objective

Alignment - How will this project meet the Strategic Project Fund Objective identified above? \*

| Describe how your project meets the chosen Objective and aligns with the aims of the fund: to increase community participation, access and organisational sustainability; encourages a collaborative use of space; and creates a safer, more accessible, and user-friendly facility for the community. Your application can be strengthened with evidence and supporting documentation.   |
|---|
| Project Milestones  |
| Outline key stages/milestones of the project, including expected time frames (start/finish dates).  |
| *   |
|   |
|   |
| Acknowledgement   |
| List the sponsorship entitlements that your organisation would be prepared to offer Gladstone Regional Council for their support *  |
|   |
| For further information about Council's acknowledgement expectations refer to the Gladstone Regional  |
| Council Fundseeker Toolkit.   |
| Other suggestions:  |
| Other suggestions:  Acknowledgement Statement published on the organisation's Social Media platform   |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council  ☐ Council acknowledgement at the official opening or launch of the project  |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council  ☐ Council acknowledgement at the official opening or launch of the project  ☐ Approved Council logo to be displayed on signage during project construction.  ☐ Acknowledgement Statement and logo published in the organisation's newsletter  |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council  ☐ Council acknowledgement at the official opening or launch of the project  ☐ Approved Council logo to be displayed on signage during project construction.   |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council ☐ Council acknowledgement at the official opening or launch of the project ☐ Approved Council logo to be displayed on signage during project construction. ☐ Acknowledgement Statement and logo published in the organisation's newsletter This list is not exhaustive of options. Please include any proposed acknowledgements for  |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council ☐ Council acknowledgement at the official opening or launch of the project ☐ Approved Council logo to be displayed on signage during project construction. ☐ Acknowledgement Statement and logo published in the organisation's newsletter This list is not exhaustive of options. Please include any proposed acknowledgements for  |
| Other suggestions:  ☐ Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council ☐ Council acknowledgement at the official opening or launch of the project ☐ Approved Council logo to be displayed on signage during project construction. ☐ Acknowledgement Statement and logo published in the organisation's newsletter This list is not exhaustive of options. Please include any proposed acknowledgements for consideration.   |
| Other suggestions:  Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council Council acknowledgement at the official opening or launch of the project Approved Council logo to be displayed on signage during project construction. Acknowledgement Statement and logo published in the organisation's newsletter This list is not exhaustive of options. Please include any proposed acknowledgements for consideration.  Part D - Project Budget * indicates a required field |
| Other suggestions:  Acknowledgement Statement published on the organisation's Social Media platform using a graphic and text to be provided by Council  Council acknowledgement at the official opening or launch of the project  Approved Council logo to be displayed on signage during project construction.  Acknowledgement Statement and logo published in the organisation's newsletter This list is not exhaustive of options. Please include any proposed acknowledgements for consideration.  |

Total Funding Requested (excluding GST) \*

| Must be a dollar amount. What is the total financial support you are requ                    | uesting in this application?                              |
|--|---|
| what is the total infaheral support you are requ   | resting in this application:                              |
| Please provide an explanation of how   | Council's contribution will be spent. *                   |
|  |   |
|  |   |
|  | ed toward eligible project expenses as defined within the |
| funding guideline.   |   |
| Breakdown of Council's Contribu  | tion  |
|  |   |
| Expenditure  | \$  |
|  | Must be a dollar amount.                                  |
|  |   |
|  | \$  |
|  | \$  |
|  | \$  |
|  | \$  |
|  | \$<br>\$  |
| Has a finance loan / other funding bee project? *  ☐ Yes - Funding ☐ Yes - Finance Loan ☐ No | en applied for or received in relation to this            |
| Provide details of additional funding  | *   |
|  |   |
| Include organisation name and level of funding   | sought/received.  |
| Amount of Finance Loan *   |   |
| \$<br>Must be a dollar amount.   |   |
| Other funding secured. *   |   |
| \$   |   |
| Must be a dollar amount.   |   |
| Include any funding secured from other source  | This council has used as a construction of the Co         |

contribution.

### **Budget**

Please provide a detailed breakdown of the project income and expenditure. Please include any in-kind support and value it at the cost it would be if you had to pay for the work.

It is important to include all Income (Council needs to see there is enough income to cover the cost of the project):

- the organisation contribution
- the requested contribution from Council
- any other donations, sponsorship or grants (whether it has been confirmed or not) that will contribute to the delivery of the project.

It is important to include as expenditure;

- the full expenditure of the project
- include application fees, building approvals etc
- the dollar value of any in-kind support that is contributing to the delivery of the project.

#### All amounts should be GST exclusive.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns, Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'.

Use the 'Notes' column for any additional information you think we should be aware of.

Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

| Income | \$<br>Expenditure | \$<br>Notes   |
|--------|-------------------|---|
|        |                   | Use this column for any additional information you think we should be aware of. |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |
|        | \$                | \$  |

### **Budget Totals**

| Total Income Amount   | Total Expenditure Amount | Income - Expenditure  |
|-----------------------|--------------------------|-----------------------|
| \$                    | \$                       | \$                    |
| This number/amount is | This number/amount is    | This number/amount is |
| calculated.           | calculated.              | calculated.           |

## **Budget Totals**

| Total Council Expenditure Amount  |
|---|
| This number/amount is calculated.   |
| What is the total budgeted Council expenditure cost (dollars) of your project?  |
| Total Project Cost *  |
| \$  |
| This number/amount is calculated. What is the total budgeted cost (dollars) of your project?  |
|   |
| Total percentage (%) the organisation is requesting from Council  |
| This number/amount is calculated.   |
| This figure should not be more than 80%   |
| Total percentage (%) the organisation is contributing   |
|   |
| This number/amount is calculated. This figure must be a minimum of 20% of the total project cost.   |
| Quotes  |
| Quotes  |
| Council requires the organisation to ensure best use of funds if successful.  |
| To ensure value for money in accordance with the sound contracting principles outlined in<br>the Regulation and Council's Procurement Policy, quotes for individual line items within the<br>project budget breakdown will be required as detailed below: |
| • Under \$4,999 (ex GST) – 1 verbal/written quote required.   |
| <ul> <li>\$5,000 - \$14,999 (ex GST) - 2 written quotes required (from 2 different suppliers).</li> <li>Over \$15,000 (ex GST) - 3 written quotes required (from 3 different suppliers).</li> </ul>   |
| Quotes are to be current (no older than 2 months), cover all components of the funding requested and itemised.  |
| In the event that there is only 1 supplier reasonable available to carry out the work/service, this should be noted in the application. A quote will still need to be submitted.  |
| Quote 1   |
| Attach a file:  |
|   |
| Quote 2 Attach a file:  |
|   |
| Quote 3 Attach a file:  |

## Part E - Attachments

\* indicates a required field

### Additional Mandatory Attachments

Please attach all required documents and supporting documentation to support this application.

| Building plans/drawings/approvals etc * Attach a file:                                    |   |
|---|---|
|   |   |
| Please include as much detail as you can.   |   |
| Other supporting documents  |   |
| Please upload other documents that will help receive the Strategic Projects Fund Funding. | to strengthen and support your application to |
| <b>Organisations Strategic Plan</b><br>Attach a file:                                     |   |
|   |   |
| Correspondence from governing bodies Attach a file:                                       | highlighting the need/ benefit of project     |
| This could be in written or video format.   |   |
| <b>Letters of support</b><br>Attach a file:   |   |
| This could be in written or video format.   |   |
| Membership surveys, feedback or comp<br>Attach a file:                                    | laints  |
| This could be in written or video format.   |   |
| <b>Meeting Minutes</b><br>Attach a file:  |   |
|   |   |
| Additional information<br>Attach a file:  |   |
|   |   |

| Attach a file:   |
|--|
|  |
| Attach a file:   |
|  |
|  |
| Part F - Lodgement   |
| * indicates a required field   |
|  |
| Privacy Collection Statement   |
| The Gladstone Regional Council is collecting your personal information on this form to process this request. The information will only be used by authorised Council employees for the purposes of this request, or for the purpose of performing other Council functions and responsibilities. Your personal information will not be given to any other person or agency unless you have given us permission to do so or we are required to do so by law.   |
| Do you give permission for your email address to be added to the Community Investment Program mailing list for future funding updates? *  ○ Yes  ○ No  |
| Declaration  |
| I/We, the applicant:-  |
| <ul> <li>Declare that the above information is true and correct in all respects (to the best of my knowledge) at the time of lodgement of this acquittal with the Gladstone Regional Council;</li> <li>Submit the acquittal with the full knowledge and agreement of the management of the organisation;</li> <li>Have read the associated Policy and Guidelines;</li> <li>Agree that I/we will make contact with Gladstone Regional Council immediately if any of the details given in relation to this application change or are incorrect; and</li> <li>Provide consent for Council to:-</li> </ul> |
| <ul> <li>Advertise projects that have been successfully funded by Council (i.e media<br/>release, social media); and</li> </ul>  |
| <ul> <li>Advertise successful recipient details on Council's website (including but not<br/>limited to, project description, name of recipient, amount funded).</li> </ul>   |
| COVID 19 *  O In submitting this application I/we acknowledge that I/we accept responsibility to comply with all laws, Government directions and health directives in respect to COVID19; and will supply a copy of any relevant COVID Safe Event or Industry Plan if requested by Council Officers for consideration in the assessment of this application.   |
| Submitting Officer's Name *  |
|  |

| Submit | ting Officer' | s Position * |        |  |
|--------|---------------|--------------|--------|--|
|        |               |              |        |  |
|        |               |              |        |  |
| Submit | ting Officer' | s Contact Nu | mber * |  |
|        |               |              |        |  |

**IMPORTANT**: Once the acquittal has been submitted you can no longer edit this online acquittal form. Please ensure all details are true and correct and all supporting information has been attached.