Community Donations - Application Form
Form Preview

Part A - Applicant Details

* indicates a required field

Organisation Details

Organisation Name *
Organisation Name

Postal Address *
Address

Contact Name *
Title   First Name   Last Name

Contact Position *

E.g. president, secretary, treasurer

Contact Number *

Email Address *

Brief summary of the Organisation History/Purpose *

Eligibility

Please tick the following that relate to the Organisation: *
☐ Not for Profit community organisation based in the Gladstone Regional Council area
☐ Not for Profit community organisation servicing the Gladstone Regional Council area
☐ Not for Profit sporting organisation/active recreation group based in the Gladstone Regional Council area
☐ Incorporated

☐   Has an ABN
☐   Financially solvent
☐   Has a current operational bank account for funding to be paid into
☐   Has a delinquent debt to Council (excluding interest free loans) or any outstanding matters/concerns with Council
☐   Has failed to adequately acquit, manage or deliver outcomes from previous Council funding
☐   Has access to funds generated internally from permanently licensed premises or onsite gaming machines

Incorporation Number *

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	

Has the Organisation already received funding from Gladstone Regional Council in the financial year that this application is being lodged? *
○ Yes   ○ No

If yes, please provide details of funding received.

Part B - Community Purpose Details

* indicates a required field

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Is this application for an event, project or goods? *
○ Event   ○ Project   ○ Purchase of Goods

Event / Project Description

Title of the event / project / goods *

Address / location of where the event / project will take place *

Who owns the land / facility of where the event / project will take place? *
○ Council   ○ State Government   ○ Applicant   ○ Other

Has approval by the land owner / facility been granted to carry out this project at the above location? *
○ Yes   ○ No   ○ Not Applicable - this project does not affect the land/ facility

Date of Event

Not applicable for purchase of goods not related to an event.

Provide a description of the event / project and what it aims to achieve *

Is there a community need / interest for this event / project and what is the evidence to support this? *

Is this a new or existing event / project in the Gladstone Region? *
○ New   ○ Existing

Is this a 'one off' or 'annual' event / project? *
○ One off event / project   ○ Annual event / project

Acknowledgement

How will Gladstone Regional Council be acknowledged for their support? *

I.e. social media/promotions/publicity relating to the funded event / project.

Part C - Event / Project Budget

* indicates a required field

Funding Request

Total Funding Request *

$

Must be a dollar amount.
Maximum $1,500

Total Project Cost *

$

Must be a dollar amount.

What will the funding be used for? *

Breakdown of Costs (that the funding will be used for)

Description of Items	$
	$
	$
	$
	$
	$
	$
	$
	$

Has other funding been applied for or received in relation to this event / project? *

○ Yes　　　　　　　　　　　　　○ No

This includes unsuccesful funding applications through Councils Community Investment Program

Provide details *

Include organisation name and level of funding sought/received.

Part D - Attachments

Please attach supporting documentation relevant to this application.

Attach a file:

Attach a file:

Attach a file:

Attach a file:

Attach a file:

Part E - 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:-

- 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 application with the Gladstone Regional Council;
- Submit the application with the full knowledge and agreement of the management of the organisation;
- Have read the associated Policy and Guidelines;
- 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
- Provide consent for Council to:-
    - Advertise projects that have been successfully funded by Council (i.e media release, social media); and
    - Advertise successful recipient details on Council's website (including but not limited to, project description, name of recipient, amount funded).

Applicant Name *

Applicant Position *

E.g. president, secretary, treasurer.

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