

Prevention of Violence Against Women Grants Program Application form



Please ensure you have thoroughly read and understood the Prevention of Violence Against Women Grant guidelines. If you have any questions, please seek clarification from AlburyCity or Wodonga Council as incomplete applications cannot be accepted.

Project details	Name of your project:	
	Brief description of your project:	
	Amount of funding being requested: \$	
	Funding category being applied for: <input type="checkbox"/> Prevention <input type="checkbox"/> Assistance	
Applicant details	Name of the organisation/group applying for the grant:	
	Postal address of organisation:	
	Name of contact person:	
	Address (if different from above):	
	Phone:	Mobile:
	Email:	
Auspice organisation details	Is your project/event auspiced by another organisation? <i>If yes, complete the details below.</i>	Y <input type="checkbox"/> N <input type="checkbox"/>
	Name of the organisation/group applying for the grant:	
	Postal address of organisation:	
	Name of contact person:	
	Address (if different from above):	
	Phone:	Mobile:
	Email:	
Organisation's statutory details	Is your organisation (select Yes or No):	Y <input type="checkbox"/> N <input type="checkbox"/>
	• A business with a current Australian Business Number?	<input type="checkbox"/> <input type="checkbox"/>
	• A non-profit community based organisation?	<input type="checkbox"/> <input type="checkbox"/>
	• An incorporated entity?	<input type="checkbox"/> <input type="checkbox"/>
	• An education provider (auspice for a project/event)?	<input type="checkbox"/> <input type="checkbox"/>
	• Registered for GST?	<input type="checkbox"/> <input type="checkbox"/>
	• If yes, what is the organisations ABN:	
	• Has your organisation received financial support from the council this financial year?	<input type="checkbox"/> <input type="checkbox"/>
	• Does your organisation have any other connections with the council? If yes, please describe: _____	<input type="checkbox"/> <input type="checkbox"/>
	• Does your organisation have Public Liability Insurance (\$10 million)? If yes, please attach copy.	<input type="checkbox"/> <input type="checkbox"/>

Prevention of Violence Against Women Grants Program Application form



Organisation's aim	Please briefly describe the aims of your organisation and how they are achieved.
---------------------------	--

Proposed project details	Will your project/event occur within the Albury or Wodonga Local Government boundary? <i>(Please refer to the funding conditions)</i>	Y <input type="checkbox"/>	N <input type="checkbox"/>
	What are the aims of your project/event?		
	Please briefly describe the activities of your project/event:		
	What do you hope will happen as a result?		
	Please briefly describe which two objectives your project will meet (refer to guidelines).		

Prevention of Violence Against Women Grants Program Application form



	<p>Please outline who is the target audience and list any specific groups who will benefit from the project/event and how they will be involved. <i>(for example, people who self identify as Aboriginal, culturally diverse, on a low income, have a disability, aged, at risk of suffering poor health and/or children and young people)</i></p>																																				
	<p>How many participants including volunteers will be involved?</p>																																				
	<p>Total number of estimated volunteer hours:</p>																																				
<p>Community impact/value</p>	<p>If an event, how many people do you expect to attend?</p> <p>How will this project/event assist in sharing knowledge, building skills and strengthening partnerships?</p>																																				
	<p>Please list your current partnerships:</p>																																				
<p>Project timeline</p>	<p>Please outline an overview of key tasks and timelines for your project: <i>(PLEASE NOTE: Dates can be an estimation at the time of application)</i></p> <table border="1" data-bbox="304 1597 1449 2136"> <thead> <tr> <th>Phase</th> <th>Date</th> <th>Overview of task</th> </tr> </thead> <tbody> <tr> <td>Commencement:</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Project completion:</td> <td></td> <td></td> </tr> </tbody> </table> <p><i>For all events, please attach your event plan.</i></p>	Phase	Date	Overview of task	Commencement:																														Project completion:		
Phase	Date	Overview of task																																			
Commencement:																																					
Project completion:																																					

Prevention of Violence Against Women Grants Program Application form



Project budget		Amount	Confirmed
<i>All figures to be GST inclusive</i>	Income/funding source		
	Prevention of Violence Against Women Grant fund requested	\$	<input type="checkbox"/>
	Funding requested from other sources	\$	<input type="checkbox"/>
	Cash contribution (<i>your organisation</i>)	\$	<input type="checkbox"/>
	Sponsorship money from businesses	\$	<input type="checkbox"/>
	Value-in-kind contribution	\$	<input type="checkbox"/>
	Other	\$	<input type="checkbox"/>
		\$	<input type="checkbox"/>
		\$	<input type="checkbox"/>
		\$	<input type="checkbox"/>
	Total	\$	
	Expenses (<i>For example, hire of equipment/venue, marketing, catering, materials etc</i>)	\$	<input type="checkbox"/>
		\$	<input type="checkbox"/>
		\$	<input type="checkbox"/>
	\$	<input type="checkbox"/>	
	\$	<input type="checkbox"/>	
	\$	<input type="checkbox"/>	
	\$	<input type="checkbox"/>	
	\$	<input type="checkbox"/>	
Total	\$		
Grand total	\$		
<i>Please attach quotes for expenditure items over \$500.</i>			
How did you hear about us?	How did you hear about Wodonga's Community Impact Grants program?		
	<input type="checkbox"/> Another organisation <input type="checkbox"/> Print media <input type="checkbox"/> Word of mouth <input type="checkbox"/> A council officer <input type="checkbox"/> Wodonga Council website <input type="checkbox"/> Other		
	We are keen to hear and learn about the outcomes of your project/event. Does your organisation agree to participating in a project/event evaluation process?	Y <input type="checkbox"/>	N <input type="checkbox"/>
Checklist	Are all sections completed?	<input type="checkbox"/>	
	Are quotes attached?	<input type="checkbox"/>	
	Is the budget attached?	<input type="checkbox"/>	
	Have you included the correct contact details?	<input type="checkbox"/>	
	Is the form signed and dated?	<input type="checkbox"/>	
	Are the correct insurances attached, where applicable?	<input type="checkbox"/>	
	In some instances, the councils may seek to promote the funding as a media opportunity. Please tick the box if you are agreeable to this occurring, in consultation with you.	<input type="checkbox"/>	

Prevention of Violence Against Women Grants Program Application form



Certification

I declare that the details provided above are correct and I am authorised to sign on behalf of the application applying for the Prevention of Violence Against Women Grants Program.

Signed:	
Printed name:	
Organisation:	
Date:	

Please return this form, fully completed, marked 'Prevention of Violence Against Women Grants program' to:

Completed applications can be hand-delivered to either Albury or Wodonga councils.

Email: info@wodonga.vic.gov.au or info@alburycity.nsw.gov.au

Faxed applications will not be accepted.

If you require advice or help with lodging your application please contact the councils on (02) 6022 9300 (Wodonga) or (02) 6023 8111 (Albury).

Please keep a copy of your application for your own records.

OFFICE USE ONLY

Panel recommendation: <input type="checkbox"/> Meets the funding criteria and recommend amount \$ _____ <input type="checkbox"/> Does not meet funding criteria	Panel members:
	Name:
	Signature:
	Name:
	Signature:
	Name:
	Signature:

Comments:

Managers approval:

Yes No

Name: _____

Signature: _____