

COMMUNITY GRANT APPLICATION FORM

2011/12 Round 2 (February 2012)

Name of your group: _____

Your postal address:

Contact name for your group: _____

Position: _____

Phone number: _____

Email: _____

IS YOUR GROUP INCORPORATED?

Yes - If you have an ABN Please state _____

No - What is the name of the incorporated group/organisation that will sponsor you?

Contact name: _____

Position: _____

Phone number: _____

Email: _____

ABN: _____

Have you previously received financial support in any form from the City of Armadale?

No

Yes - What year did you receive this support _____

How much are you applying for in this grant round? _____

1. What is the name of your project?

2. What is the project about?

3. How many people will be involved in this project?

4. Who will benefit from this project?

5. Where and when will the project be conducted?

YOUR BUDGET

IMPORTANT: Your income for the project must be the same as your expenditure

INCOME FOR PROJECT (This refers to where your money is coming from to pay for the project)	
How much is your group contributing towards the project? (cash or in-kind support)	\$
How much will another source (not your group or the City of Armadale) be contributing towards the project?	\$ Source: \$ Source:
How much grant money are you applying for from the City of Armadale?	\$
TOTAL INCOME (Same as total expenditure)	\$

EXPENDITURE FOR PROJECT (This refers to what you are going to spend the money on)	
Item 1:	\$
Item 2:	\$
Item 3:	\$
Item 4:	\$
Item 5:	\$
TOTAL EXPENDITURE (Same as total income amount)	\$

What 'in-kind' contribution will your group be contributing to the project?
eg: volunteer support, administration, catering, venue hire etc

Declaration

THIS PART OF THE APPLICATION MUST BE COMPLETED BY THE INCORPORATED BODY APPLYING FOR THE GRANT. IF YOU ARE NOT INCORPORATED YOU MUST GET YOUR SPONSOR TO COMPLETE THIS SECTION.

I hereby certify that I have been authorised by (your organisations name)

_____ to submit this application and that the information contained herein to the best of my knowledge is true and correct.

I understand that any decision by the City of Armadale is final and is not subject to an appeal process.

I agree on behalf of my organisation that if our application is successful that the funds will be expended according to the details given and that an acquittal will be completed at the end of the project to the satisfaction of the City.

Coordinator/President/Manager _____

Signature: _____ Date: _____

When you submit this grant application you need to also include

- A letter of support from another group/organisation
- One quote for each piece of equipment over \$200
- Proof of you incorporation status, or that of your sponsor

PLEASE SEND YOUR APPLICATION TO:

Community Development

City of Armadale

Locked Bag 2

ARMADALE WA 6992

Or email to info@armadale.wa.gov.au

Applications must be received
no later than 4:00pm Friday 17th February 2012
Late applications will not be considered.

<u>OFFICE USE ONLY</u>
GRANT: APPROVED / DENIED
DATE:\.....\.....
SIGNED:
Manager Community Services