

# \*2024\_Active Inner West\_Two Year\_Application Form Preview

## Introduction

### Overview

Welcome to the application form for the **Active Inner West grants stream**. Grant funding of up to \$5,000 per year for two years (multi-year) is available to support community and non-government groups that offer sport and/or active recreation programs and services to residents in the Inner West.

Council's multiyear grant funding offers community organisations the opportunity to develop innovative projects which require longer timeframes to achieve outcomes. In 2024, Council will offer multi-year grants over two years for Active Inner West grants.

### Grant Guidelines

Before completing your application, please refer to [Council's Grant Guidelines](#) to ensure your project is eligible and aligned to the objectives of the grant stream you are applying to. Applicants are encouraged to familiarise themselves with [Council's plans, policies and strategies](#).

**Incomplete applications and/or applications received after the closing date will not be considered.**

### Other Council grant streams

Council offers a number of grant programs to support a culturally diverse, progressive and sustainable Inner West.

Applicants may only submit one application each round. Please check that your application is submitted to the most relevant grant stream. Once submitted it is not possible to transfer applications to another stream.

For more information, please visit our [website](#).

### For more information

It is recommended all applicants speak with a Council grant officer on 02 9392 5515 to clarify your project ideas, eligibility and to ensure you are applying to the correct grant stream. Applications will not be transferred between grant streams.

### Instructions

- Please provide a response to all relevant questions
- When you have completed all of the questions click on **Next Page** to view the next page of the form
- Click **Save Progress** regularly to make sure your changes are saved
- You can jump pages by clicking on the **Application Form Navigation** area on the right-hand side of the form

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- Once you have completed all pages the last page will ask you to **Review** your application - if you are happy with your responses you can click **Submit**. If your submission was received you will be sent a **confirmation message** saying your application has been submitted.

## Project Details

\* indicates a required field

### Project Summary

Please specify how your project will benefit the Inner West. To be eligible for funding, projects must be located in the Inner West Council area or offer a project that primarily benefits Inner West residents. A [detailed Inner West Council ward map](#) is available to download.

**Project title \***

Must be no more than 15 words.

Hint: Provide a name for your project/initiative. Your title should be short but descriptive

**Start Date \***

Must be a date and no earlier than 1/10/2024.

**End Date \***

Must be a date.

**Brief project description. This content will be used to describe your project to Council \***

Word count:

Must be no more than 100 words.

Hint: Include a brief summary of your target group (i.e. who it benefits), what you will do (i.e. the activities you will perform), and what you expect to achieve from your activities (outcomes)

### Project purpose

**How will your project benefit local residents, workers and/or visitors to the Inner West \***

Word count:

Must be no more than 100 words.

Hint: Explain why this initiative is needed, and why the activities you propose will produce the outcomes you seek. Where possible provide evidence that demonstrates the link between the activities to the outcomes

### Project goals

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Please explain how you intend to meet the grant objective/s through your project outcomes and measures. These are defined as:

- **Project goal:** Describe the outcome/s you want to achieve at the end of your project.
- **How will you measure this?** Demonstrate how you will measure your achievement towards the project goals. What evidence will you provide to show outcomes achieved.

At least one goal must be provided.

### Goal 1 \*

E.g. Increased awareness; community participation; skills development etc.

### How will you measure this? \*

E.g. # activities, # participants or attendees, % participants who reported a benefit etc.

### Goal 2

E.g. Increased awareness; community participation; skills development etc.

### How will you measure this?

E.g. # activities, # participants or attendees, % participants who reported a benefit etc.

## Project plan

Please provide a timeline outlining the key activities to be delivered.

Key activity or milestone	Due date	Details
<input type="text"/>	<input type="text"/>	<input type="text"/>
Hint: What are the key points in your project plan?	Hint: When do you plan to achieve this?	Hint: Provide further details as necessary

## Project location

Please indicate the suburb/s your project will cover. **Only select a maximum of four target suburbs.** If your project does not target a particular suburb, but does target the Inner West Council area, simply select *Inner West LGA (all)*.

### Which suburbs will the project benefit? \*

- |                                       |  |                                       |  |
|---------------------------------------|--|---------------------------------------|--|
| <input type="checkbox"/> Annandale    | <input type="checkbox"/> Croydon Park  | <input type="checkbox"/> Lilyfield    | <input type="checkbox"/> St Peters                   |
| <input type="checkbox"/> Ashfield     | <input type="checkbox"/> Dobroyd Point | <input type="checkbox"/> Marrickville | <input type="checkbox"/> Summer Hill                 |
| <input type="checkbox"/> Balmain      | <input type="checkbox"/> Dulwich Hill  | <input type="checkbox"/> Newtown      | <input type="checkbox"/> Sydenham                    |
| <input type="checkbox"/> Balmain East | <input type="checkbox"/> Enmore        | <input type="checkbox"/> Petersham    | <input type="checkbox"/> Tempe                       |
| <input type="checkbox"/> Birchgrove   | <input type="checkbox"/> Haberfield    | <input type="checkbox"/> Rozelle      | <input type="checkbox"/> Inner West LGA (all)        |
| <input type="checkbox"/> Camperdown   | <input type="checkbox"/> Leichhardt    | <input type="checkbox"/> Stanmore     | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Croydon      | <input type="checkbox"/> Lewisham      |                                       |  |

No more than 4 choices may be selected.

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## Project location address:

\*

### Word count:

Must be no more than 100 words.

Hint: Include address and other relevant information for the project location/s

## Target audience

Is your project targeting a general audience (i.e. the Inner West community) or do you address specific groups in the local area? Please state which Inner West community members will benefit from this project in the questions below.

### Primary target audience

\*

- |  |   |
|--|---|
| <input type="checkbox"/> Aboriginal and Torres Strait Islander peoples                 | <input type="checkbox"/> Youth  |
| <input type="checkbox"/> All residents   | <input type="checkbox"/> People with a disability   |
| <input type="checkbox"/> Women   | <input type="checkbox"/> Refugees and asylum seekers                                      |
| <input type="checkbox"/> Children and families   | <input type="checkbox"/> Lesbian, gay, bisexual, transgender, queer communities           |
| <input type="checkbox"/> Older people (over 55 years old)                              | <input type="checkbox"/> People who are homeless (including residents of boarding houses) |
| <input type="checkbox"/> People from culturally and linguistically diverse communities | <input type="checkbox"/> Other: <input type="text"/>                                      |

No more than 2 choices may be selected.

Hint: Select who the primary beneficiaries / contributors are

## Applicant capacity

### What skills and experience do the people in the project team bring to the project?

\*

### Word count:

Must be no more than 100 words.

Hint: Council wants to understand the skills and experience of those involved in project delivery. Supporting material can be attached at the end of the application

## Marketing and promotion

### Please provide details of how you intend to market and promote your project to the Inner West community \*

### Word count:

Must be no more than 100 words.

## Project partners

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**Please provide details of any individual/s and/or organisation/s you plan to partner with to deliver this project.**

An acknowledgement letter from these partners must be attached confirming their involvement in the project. Attach this letter to the supporting material section that follows.

<b>Name of organisation</b>	<b>Role in project</b>	<b>Contact email</b>	<b>Upload letter of support</b>

### Supporting Material

**Please provide a brief outline of similar projects you/your club have undertaken in the past \***

**Please provide the names and roles of key personnel who will deliver this project \***

**If your project is taking place on land you do not own/manage, attach land managers approval (eg letter from School Principal or )**

Attach a file:

### Budget

\* indicates a required field

#### Preparing Your Budget

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for. Please discuss your budget with your grant stream officer to ensure it includes:

- Indicative quotes must be included for any items over the value of \$500
- Expected project income, including any contributions (donations of goods or services) or other funding sources
- Expected expenditure, including specifying which items you intend to purchase with Council grant funds
- Please account for any in-kind contributions in the 'In-Kind' column
- Please do not add commas to figures - e.g. Figures must read "\$1000" not "\$1,000" to ensure your table automatically sums correctly

#### Two-Year grant funding request

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Two-year grant funding offers community organisations the opportunity to develop innovative projects which require longer timeframes to achieve outcomes.

Two-year grant applicants must create a budget for the duration of the grant (two years), detailing their desired payment instalment in Year 1 and Year 2.

**Year 1 (2024-2025) \***

\$

Must be a dollar amount and no more than 5000.

**Year 2 (2025-2026) \***

\$

Must be a dollar amount and no more than 5000.

**Total Amount Requested**

\*

\$

This number/amount is calculated.

What is the total financial support you are requesting in this application?

## Council facility hire for projects

Council may provide fee waivers for hire of Council facilities to undertake projects that receive grant funding. Please discuss your needs for a project venue (including parks and open spaces) with the relevant grant stream officer.

## Budget: Income

Your budget must show how you arrived at the total amount requested for this grant, including all sources of project income and expenditure.

Income Description	Funding Source	\$ In-Kind Contributions	\$ Income Year 1	\$ Income Year 2
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
e.g. Inner West Council Grant	e.g. Inner West Council	e.g. Volunteer Time Must be a dollar amount.	e.g. \$ Funding Requested Year 1 Must be a dollar amount.	\$ Funding Requested Year 2 Must be a dollar amount.

## Budget: Expenditure

Expenditure Description	Funding Source	\$ In-Kind Contributions	\$ Expenditure Year 1	\$ Expenditure Year 2
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
e.g. Resources	e.g. Inner West Council Grant	e.g. Volunteer Time	Must be a dollar amount.	Must be a dollar amount.

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### Budget Totals (read only)

Please ensure your budget balances so that Total Income Amount = Total Expenditure Amount.

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

### Supporting material

**Please attach quotes for any project expenses over \$500**

Attach a file:

**If you or your organisation received a grant from Inner West Council in the last 1-2 years, have you acquitted it? \***

Yes

No

Didn't receive funding in the last 2 years

Acquittals are what Council uses to see how funds were spent and what outcomes were achieved from groups or people who have been funded.

**Have you or your organisation received or are currently receiving any other forms of support from Inner West Council? \***

Yes

No

**If yes, please specify the other types of support you are currently receiving from Inner West Council \***

Word count:

Must be no more than 75 words.

**Have you or your organisation applied to other funding sources for this project? \***

Yes

No

**If yes, please specify the additional funding sources you have applied to receive \***

Word count:

Must be no more than 75 words.

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### Contact for Application

\* indicates a required field

#### Applicant Contact Details

**Applicant organisation \***

Organisation Name

**Applicant contact \***

First Name

Last Name

Hint: This is the primary person Council will communicate with about this grant

**Applicant address \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Applicant phone number (business hours) \***

Must be an Australian phone number.

**Applicant phone number (after hours) \***

Must be an Australian phone number.

**Applicant email \***

Must be an email address.

Hint: This is the email address Council will use to communicate with you about this grant

#### Organisation type

**Select which type of organisation you are applying on behalf of: \***

- An incorporated not-for-profit community group or organisation
- An unincorporated community group applying through an Auspice incorporated not-for-profit organisation

#### Auspice approval

Unincorporated groups require an auspicing organisation to be eligible to apply.

Auspicing is where a legally constituted not-for-profit organisation administers grant funding on behalf of an applicant who is not eligible to apply in their own right.

**Is this organisation agreeing to act as an**

- Yes
- No



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## Auspice for your grant application? \*

Please upload a letter of agreement from the Auspice Organisation to support this application \*

Attach a file:

## Organisation Details

\* indicates a required field

### Organisation Contact Details

Please think carefully about the Organisation that is applying. If successful, this organisation will be required to sign a funding agreement and be responsible for any funding that is awarded.

Legal name of organisation \*

Organisation Name

Hint: Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO

Organisation contact \*

First Name

Last Name

Position held in organisation \*

Hint: Manager, Board Member, Fundraising Coordinator

Organisation address \*

Address

  

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Organisation postal address (if different)

Address

  

Organisation phone number \*

Must be an Australian phone number.

Organisation email address \*

Must be an email address.

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**Website URL (if applicable)**

Must be a URL.

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

- Yes  
 No

ABN Lookup

**Organisation 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	

Must be an ABN.

Supporting Materials

**Please upload a copy of your organisation's Certificate of Incorporation \***

Attach a file:

**Please upload a copy of your organisation's most recent Audited Statement or Statement of Income and Expenditure \***

Attach a file:

**Please upload a copy of your organisation's Certificate of Public Liability Insurance to the value of \$20 million \***

Attach a file:

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## Certification

\* indicates a required field

### Supporting documentation

**Please upload any final documents relevant to your application:**

Attach a file:

Hint: Attach any final supporting documentation here, such as letters of support

## Certification

Before you can complete and submit an application you must accept the following conditions by declaring:

I certify that:

- I have read and understood the Inner West Council Grant Guidelines
- I accept the conditions and have been authorised to make this application
- All information supplied as part of this application will be true and accurate to the best of my knowledge
- All activities proposed by this application will be conducted in accordance with current legislation, including but not limited to, complying with Working with Children legislation
- The information provided for the title and description may be used for media and communication purposes

I acknowledge that:

- Applications and any additional materials cannot be submitted after the advertised closing date and time
- Inner West Council has the right to investigate any information provided in this application and/or to request for additional information
- It is solely my responsibility to ensure my application is correct and complete before submitting. Inner West Council does not check, amend or update applications. Applications cannot be modified after being submitted
- Inner West Council has the right to withdraw any offer of funding or demand the return of funds already paid if my declaration is found to be incorrect or misleading
- Inner West Council staff are available 9am-5pm Monday to Friday during the grant round to provide technical and general guideline advice. Staff are not able to provide advice on content or choices required within my application.

**Do you understand and acknowledge these conditions?**

**Authorised applicant's endorsement \***

Yes

**Name of authorised person \***

First Name

Last Name

**Declaration date \***

Hint: No late applications will be accepted

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## Important note for applicants

**Please keep a record of the SmartyGrants (username and password) details you used to submit this application.**

You will need your SmartyGrants login details for all future communications relating to this project, including funding agreements and evaluation acquittal reports.