

# REQUEST FOR A COMMUNITY DONATION 2017-2018

Donations by the Council reflect the Council's desire to improve the wellbeing of the community of the Gwydir Shire. The Council welcomes requests for donations that allow the Council to pursue its overall objectives through community based initiatives.

Applications should address how the funding requested will assist the Council to achieve its Vision and Mission:

#### VISION

# To be the recognised leader in Local Government through continuous learning and sustainability

(What we would like the Gwydir area to be in five (5) years' time and beyond)

#### MISSION

To ensure that the Council's long term role is viable and sustainable by meeting the needs of our residents in a responsible caring way, attract sustainable development while maintaining the traditional rural values, character and culture of its people

(A broad but focused statement, which describes why Gwydir exists and how it intends to satisfy its vision. It provides a focus for all the principal activities of the Council)

Previously successful applicants should not assume that funding will always be granted or that the recurrent funding given will be continued.

Eligible groups/organisations/individuals are required to:

- Be located within the Gwydir Shire Council area
- Have the majority of members residing in the Gwydir region
- Be a non-profit group/charitable organisation; and
- Provide a community benefit to the residents of the Gwydir Shire Council area

Organisations or individuals are ineligible if:

- previous Council grants have not been satisfactorily acquitted when a request to do so has been made
- you are a political group
- you are a commercial operator with commercial activities (day-today operating, building or staffing costs of an agency)
- the application is for retrospective funding.

#### Acquittal

Recipients of donations from Council will now be required to show evidence of how the monies were expended.

Recipients are also required to show evidence of Council's acknowledgement in all promotional material/publicity and/or at the event/activity.

# YOUR CONTACT INFORMATION

Mr / Mrs /	Miss / Ms			
The Organisation you represent:				
Position in Organisation:				
Your Address:				
		. Pos	st Code	
Your Phone No. (work):				
Phone No. (mobile):				
Email Address:				
SECTION ONE – ORGANISATION DETAILS				
Is your organisation:				
<ul> <li>Non-profit</li> </ul>			YES 🗆	NO
<ul> <li>Incorp</li> </ul>	orated		YES 🗆	NO
If yes, please select the type of incorporation				
	Company limited by guarantee			
	Co-operative			
	Incorporated Association Number:			
	Other (please specify):			
<ul> <li>Auspiced</li> <li>YES INO</li> </ul>			NO	
Name of auspicing organisation:				

# (Please note the Council will only make grants to organisations with a bank account in its name)

# SECTION TWO – PURPOSE OF DONATION

1. What is the donation for? Please provide as much detail as you can about the project

#### SECTION THREE – COMMUNITY NEEDS

1. Describe the community need your project will seek to address?

2. How was this community need identified?

3. How will your project meet this need?

4. How will this funding assist the Council to achieve its Vision and Mission?

# **SECTION FOUR – EFFECTIVE PROJECT DELIVERY**

1.	Does your organisation have previous experience in delivering any sim projects? Please provide details below.	
2.	Does your organisation have previous experience in managing funding?	
3. a)	Please provide details for how you will deliver your project including objectives you are seeking to achieve and the major tasks you will do.	
3. b)	Please provide a timeline for delivering your project in the space below, from the start date to the finish date	
Starti	ng date//	
Detai	ls	
Estim	ated Finishing Date/	
Detai	ls	
Any n	nilestone events	

# SECTION FIVE – VALUE FOR MONEY

Please provide details of :

- a) the total amount of funding requested \$.....
- b) an estimate of the Shire residents assisted with this funding ......
- c) the impact of Council not providing the requested assistance or, if applicable, only a proportion of the previous funding.

#### SECTION SIX – ADDITIONAL INFORMATION

Please provide any additional information below that you would like to bring to the Council's attention:

#### **SECTION SEVEN – PREVIOUS DONATIONS FROM COUNCIL**

- 1. Have you received a previous donation from Council?
  - □ YES □ NO
- 2. If 'yes' has the Council's past donation been a long standing annual allocation and always for the same basic purpose as this application?

□ YES □ NO

3. Have you submitted a report to Council on expenditure of previous donations?

□ YES □ NO

4. Do you receive any other financial or non- financial support from Council? (Subsidised rent, sponsorship, media promotion etc)

□ YES □ NO Please specify: .....

### **SECTION EIGHT – CONDITIONS OF FUNDING**

#### These are the conditions of funding:

- 1. The funds are to be used for the purpose for which they were requested. Applicants cannot vary the purpose of the grant without written approval from Council.
- 2. Donations must be spent within the financial year that the funds were granted unless otherwise approved in writing by Council.
- 3. Any unspent monies are to be returned to Council as soon as the funded project has been finalised.
- 4. Each recipient to provide Council with a brief summary of how the money was used.
- 5. At the conclusion of the financial year, groups are required to complete a simple financial acquittal form (to be provided with the funding). Acquittals must be received before Council can consider any further requests for a community donation.
- 6. Recipients to report back on the outcome of the donation and to allow information to be used by Council in media coverage.
- 7. Where appropriate, performance groups receiving a donation to be invited to perform at no cost at Council and civic events, subject to their availability.
- 8. Recipients to acknowledge Council's contribution on printed promotional material and annual reports.
- 9. The Mayor or delegate will be invited to attend any activity associated with the funded activity or function.

## **SECTION NINE – AUTHORISATION**

#### Certification

certify that I have read and understood the Guidelines and have been authorised to make this application. I agree to abide by the conditions of funding. To the best of my knowledge, the statements in this application are true and correct.

Print Your Name:	
Your Position:	
Your Signature:	
Date:	