

Eastern Metropolitan Regional Council Community Grants Program

Application Form

1 Contact information

Please provide <u>all</u> below information.

1.1 Community Group

Group name:	
Street address:	
Postal address: (if different to above)	

1.2 Group's Contact Person:

Name:	
Position/Title:	
Phone number: (preferred / during business hours)	
Other phone number: If applicable	
Email address:	



2 Community Group Information

Certificate of Incorporation attached:		Ye	s 🗆					
ABN (Australian Business Number): Unique 11 digit number								
OR Reason for ABN exemption:								
Ple	Please attach supporting document(s)							
What is the main aim / objective / purpose of the community group?								
3	Υοι	ır Project						
3.1	Pı	roject title						
3.2		rant category			da 2 lf amulia	-hl the		
wni	cn gı	ant category d	oes you project contribut	te to	wards? If applic	able, you may select more th	an one.	
	\Rightarrow	Sustainability		\Rightarrow	Cultural			
	\Rightarrow	Social		\Rightarrow	Recreational			
3.3	Pı	roject eligibili	tv					
			owing questions:				Yes	No
	a) Does this project require ongoing funding or support other than the initial grant?							
	b)) Is this project routine or regular maintenance work to an existing facility?						
	c)	Will there be ongoing public access to the facilities, goods or services funded? □ □						
	d)	Is this application related to the replacement/repair of facilities or goods damaged by vandalism, fire or other natural disasters where the act should be covered by insurance?						



3.4 Community to benefit

Please tell us who will benefit from your project.

Where? Choose at least 1: Who? Choose at least 1:							
\Rightarrow	Gidgegannup		\Rightarrow	Guildford	\Rightarrow	Children	
\Rightarrow	Hovea		\Rightarrow	Midland	\Rightarrow	Youth	
\Rightarrow	Parkerville		\Rightarrow	Woodbridge	\Rightarrow	Families	
\Rightarrow	Stoneville		\Rightarrow	Bellevue	\Rightarrow	Seniors	
\Rightarrow	Hazelmere		\Rightarrow	Bushmead	\Rightarrow	Aboriginal or Torres Strait Islander	
\Rightarrow	South Guildford		\Rightarrow	Helena Valley	\Rightarrow	People living with disability	
\Rightarrow	Guildford				\Rightarrow	Culturally and Linguistically Diverse (CALD)	
					\Rightarrow	Other (please specify)	
Please briefly and clearly state the project's purpose including the community and / or environmental benefits. (Approximately 50-100 words) Where possible, please provide evidence of the need, e.g., statistics, letters of request/support, media stories. Example: To purchase 200 trees to plant at Wedgetail Reserve in Parkerville to provide shelter and food source for the threatened Black Cockatoo species, rehabilitate the reserve and encourage positive involvement from the community. The attached letters are from Parkerville community members requesting restoration of the reserve to help protect the cockatoos. 3.6 EMRC Acknowledgement							
How will your community group acknowledge EMRC's assistance? e.g. photographs, brochures / flyers, newsletters, social media, website, news articles, etc.							



4 Project Plan

4.1 Tasks		
Please list and briefly describe the tasks that will be completed to	achieve your project objective	s.
40. 8 : 480 4		
4.2 Project Milestones		
Please state the significant milestones / steps of your project and	the date you estimate to start ar	nd finish.
Your project cannot start until the grant has been awarded and must be	completed before 30 June the fol	lowing year.
Project Milestones	Start Date (estimated)	Finish Date (estimated)
	(countaiou)	(commutou)
4.3 Project Costs		
Please list and provide details of the goods or services to be purchased	I with the grant funding. Attach all	quotes and
additional costs.	Estimated Cos	st Quote
Details of Good / Services E.g. products, services, equipment hire.	(incl. GST)	attached
Total funding requested from EMRC. (incl. GST)		



5 Acknowledgment of EMRC

Please complete ALL questions.					
1.	Do you agree to recognise EMRC as a provider of funding and give evidence of this recognition?				
2.	Do you agree that EMRC will be formally recognised and promoted in ways such as brochures / flyers, newsletters, social media, website, news articles, signage at the site/location, or at program launches or event (i.e. via speeches or signage)?				
3.	Do you agree to notify and invite the EMRC to any public relations activities associated with the project? (e.g. program launch, event day).				
4.	Do you agree to complete and provide EMRC with a 2024/2025 Community Grants Program Project Completion Report within two months of project completion or by 30 June 2025 (whichever comes first)?				
6	Past applications				
	be eligible for funding, you must have completed and submitted a Project Completion Report for the propertion or previous year funded. Please tick the relevant box:	evious			
1.	Our group has never received funding from EMRC Community Grants Program.				
	OR				
2.	Our group last received funding in [YEAR]: Click or tap here to enter text.				
	And, our group has completed and submitted the Project Completion Report to EMRC for that year.				
7	Application Checklist				
Plea	se complete the below checklist to ensure you have provided the required information and supporting docume	ntation.			
AB	N or explanation to prove exemption				
Certificate of Incorporation attached					
All prior project completion reports have been returned to EMRC and accepted					
Adequate responses have been provided for <u>ALL</u> questions in the completed application form					
Documentation demonstrating community / environmental need (if available)					
Evidence that your community group has endorsed the project / initiative to be undertaken (if relevant)					
Copies of quotes for goods / services for which you're requesting funding are attached					
Со	pies of drafted materials that demonstrate how the community group will acknowledge EMRC's assistance				



8 Declaration

<u>Two members</u> of your organisation are required to complete the declaration below. One member must be the President (or equivalent) of the community group.

"We declare that we have been authorised by the applicant community group to prepare and submit this application to EMRC for the EMRC Community Grants Program. We declare that the information included in this application is true and correct and that we will abide by the conditions set out in EMRC's 2024/2025 Community Grants Program Guidelines, which we have read and understood."

Name:		
Position/Role:		
(President or similar)		
Signature:	Date:	
Name:		
Position/Role:		
(Other committee member)		
Signature:	Date:	

9 Submitting Your Application

Please return the completed form via -

Email: Deliver: Post:

mail@emrc.org.au EMRC Attn: Community Grants Program

Attn: Community Grants Program EMRC 226 Great Eastern Highway PO Box 234

ASCOT WA 6104 BELMONT WA 6984

Applications <u>MUST</u> be received no later than 11.59pm (midnight) Wednesday, 11 December 2024

Late applications will not be accepted.