



2010 COMMUNITY GRANTS SCHEME APPLICATION FORM

About Your Group...

Group Name: _____

Group ABN: _____

Incorporation No: _____

(If your Group is not Incorporated, please contact CGSC office)

Contact Person: _____

Postal Address: _____

Email Address: _____

Telephone: _____ Mobile: _____

What year was your group established? _____

Demographic of your group? Female _____ Male _____ Under 18 _____

Does your organisation have any membership criteria? *(If so, what are they)*

About the Project...

Project title and brief description

Link to Council Plan...

The Central Goldfields Shire Council Plan 2009-2013 is titled “Achieving Together” and it encompasses Council’s vision;

”To add to our proud heritage a prosperous and sustainable future for all”

The following five keys of success will assist in the process of achieving this vision;

1. Building an engaged, connected and inclusive community in which we take pride and embracing education as the key for advancement.
2. Managing threats to our environment, especially the lack of water and the risk of fire.
3. Establishing a diverse, prosperous and sustainable “new” local economy utilising regional opportunities and capturing the opportunities tourism generates to complement existing strengths.
4. Conserving our cultural heritage and promoting the active development of the Shire as an important centre for the arts.
5. Providing urban and rural infrastructure to enhance community life and liveability to meet aggressive population growth targets in line with regional planning.

With this in mind, please tell us how your project links in with the Council Plan?

Project Funding...

(An example to assist in completion of this section can be found in the guidelines)

Grants ranging between \$500 and \$5,000 may be applied for.

Income

What contributions will your organisation be making to the total cost of the project, what contribution are you requesting from the Community Grants Scheme, and will you be sourcing other funding?

FUNDING SOURCE	AMOUNT	CONFIRMED
Requested from Council	\$	Not applicable
Cash Sponsorships	\$	Yes / No
Other Government Funding (Federal or State)	\$	Yes / No
Organisation Cash Contribution	\$	Yes / No
In Kind Contributions	\$	Yes / No
Total Income for Project	\$	

Expenditure

How the money will be spent (*attach quotes if possible*).

ITEM	AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Expenditure for Project	\$

Note: The total cost of the project should equal the total income

APPLICANT'S DECLARATION...

(This declaration needs to be signed by two members of the group, one of whom must be the Chairman).

"We declare that we have been authorised by the applicant group to prepare and submit this application to Central Goldfields Shire Council for the Community Grants Scheme. We further declare that the information included in this application is true and correct."

Name: _____ Name: _____

Position: **Chairman** Position: _____

Telephone: _____ Telephone: _____

Email address: _____ Email address: _____

Signature: _____ Signature: _____

Date: _____ Date: _____

Please note:

- ***Applicants are advised to refer to the Grant Scheme Guidelines when completing this application form.***
- ***Closing date for applications is Wednesday 7th April 2010.***
- ***Late applications will not be accepted.***
- ***If you need help in filling out this application form please contact:
Marita Turner on 5461 0610***
- **Completed application forms and all attachments are to be forwarded to -**

***Central Goldfields Shire Council
Community Grants Scheme
PO Box 194
MARYBOROUGH VIC 3465***

Or hand deliver to 12-22 Nolan Street Maryborough.