

# Quick Response Grants Application Form 2023/24

## Form Preview

### Eligibility

\* indicates a required field

### Quick Response Grant Program 2023/24

Hepburn Shire Council is committed to supporting community groups to remain agile and responsive to issues that arise in the local Hepburn community.

The **Quick Response Grant** stream is a generalized stream designed to support local community groups that assist in strengthening community and building cohesion and whose project, program or issue may arise outside of the normal funding cycle of the Community Grant Program.

This program ensures that Council can continue to support community groups to respond to issues as they arise.

### Applicants: please note

Before completing this application form, you should have read the [Quick Response Grant guidelines](#):

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

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regard to these eligibility criteria, please contact

**Council Officers on (03) 5348 2306 or email [grants@hepburn.vic.gov.au](mailto:grants@hepburn.vic.gov.au)**

### Confirmation of Eligibility

**The eligibility criteria for the Quick Response Grant are consistent with the Community Grant Program. To be eligible for assessment the Applicant / Project must:**

- Read and understand the program guidelines.
- Be an organisation that is a legal entity with an Australian Business Number (ABN) and hold a not-for-profit status (e. an incorporated body, co-op or trust) or be auspiced by a suitable group.
- Have all permits, permissions, and necessary approvals for the project.
- Must have or demonstrate an ability to obtain Public Liability insurance for a minimum value of \$20,000,000.
- Deliver the funded project/event/activity within 6 months of signing the funding agreement.
- Deliver the funded project/activity/event within the boundaries of Hepburn Shire council and to the benefit its residents.

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- Not have an outstanding debt to Council and have completed all previous Hepburn Shire funding acquittal requirements (including other grants).

\* An Auspicing Agent is another organisation that is a legal entity with an ABN. A letter signed by two committee members from the auspice agent confirming they will auspice the application must be provided when the grant application is submitted. Auspicing agents retaining a fee for this service will not be considered. \*\* If the project is to undertake works on Council owned / managed land or property, Department of Environment, Land, Water and Planning, or, Parks Victoria land, you must provide written approval from the relevant land manager. \*\*\* Your organisation meets the requirements of being a not-for-profit by having specific statements in its governing rules; the not-for-profit and / or dissolution clause.

### **We have read the program guidelines \***

☐ Yes ☐ No

### **We are a legal entity with an ABN or we are auspiced by a suitable group \***

☐ Yes ☐ No

### **We are a not-for-profit group \***

☐ Yes ☐ No

### **Our project is to be delivered within the Hepburn Shire to the benefit of its residents \***

☐ Yes ☐ No

### **We have acquired all quotes to support expenditure \***

☐ Yes ☐ No

### **We have acquired all permits, permissions and approvals for the project \***

☐ Yes ☐ No

### **Our project will be completed within six months of signing the funding agreement \***

☐ Yes ☐ No

## Project Name and Contact Details

\* indicates a required field

### Project Name

#### **Project Name \***

Give your project a brief descriptive name

### Contact Details

#### **Organisation Name \***

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Organisation Name

**Primary contact person \***

Title First Name Last Name

This is the person we will correspond with about this grant

**Position held in organisation \***

e.g. Manager, Board Member, Fundraising Coordinator

**Primary contact phone number \***

Must be an Australian phone number.

**Primary contact email address \***

This is the address we will use to correspond with you about this grant.

**Is your organisation auspiced by another organisation for the purposes of this grant? \***

☐ Yes ☐ No

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.

**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

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### Auspice Information

\* indicates a required field

#### Auspice Organisation Details

**Name of auspicing organisation \***

Organisation Name

**Primary contact person at auspicing organisation \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Position held in organisation \***

e.g. Manager, CEO

**Contact person's primary phone number \***

**Contact person's email address \***

Must be an email address

**ABN of auspicing organisation**

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

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### Project Details

\* indicates a required field

#### What are the aims and objectives of your project? \*

Word count:

Must be no more than 300 words.

A snapshot of the overall project and a summary of what the activity is. Describe the opportunity or issues that the Project addresses. Why the Project is important or how the need is demonstrated (plans, letters, minutes, etc). Number of members, participants, groups, clubs, etc, who will benefit from the Project.

#### Project commencement date

Must be a date.

Indicate the date you believe this project will commence once funding is granted.

#### Project completion date

Must be a date.

Indicate the likely date for the completion of this project.

#### Provide a timeline of your project including milestones which will be completed:

Word count:

Must be no more than 300 words.

Detail each stage of the Project and how it will be completed.

#### What are the primary areas of focus for this project/program?

You may select up to five items. You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees).

#### Who are the expected primary beneficiaries of this project/program?

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'

### Alignment with Council Plan

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How does your project/event/activity align with the Hepburn Shire Council Plan. Hepburn Shire Council is guided by the strategies and goals outlined within the [Council Plan 2021-25](#) including the Municipal Public Health and Wellbeing Plan. Answer below to indicate which of these focus areas best align with your project/event/activity. (You can choose more than one)

### Council Focus Areas:

- **A resilient, sustainable and protected environment** - A responsive adaptive, and resilient community that addresses changes to our climate and biodiversity.
- **A healthy, supported and empowered community** - A community that values connection, supports diversity, health, and wellbeing, and is inclusive of all people and their needs.
- **Embracing our past and planning for the future** - We aim to protect our historical roots while planning for future generations.
- **Diverse economy and opportunity** - Our community is enhanced by a diverse and resilient economy that supports local aspirations through opportunity.

Select from the options below:

#### **A resilient, sustainable and protected environment \***

☐ Yes ☐ No

#### **Explain how your project aligns with this Council Focus Area**

#### **A healthy, supported and empowered community \***

☐ Yes ☐ No

#### **Explain how your project aligns with this Council Focus Area**

#### **Embracing our past and planning for the future \***

☐ Yes ☐ No

#### **Explain how your project aligns with the selected Council Focus Area(s)**

#### **Diverse economy and opportunities \***

☐ Yes ☐ No

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### Explain how your project aligns with this Council Focus Area

### Priority Areas

Will your project/event/activity address any of the Priority Areas in the Council Municipal Public health and Wellbeing Plan 2022-25?

#### Municipal Health and Wellbeing plan Priority Areas:

- **Tackling climate change and its impact on health** - Resilient and safe communities that are adapting to the public health impacts of climate change.
- **Increasing healthy eating** - Access to nutritious food and drinks for everyone, especially the most vulnerable. People are supported to make healthy lifestyle choices through collaborative people and place-based approaches.
- **Improving mental wellbeing** - Hepburn Shire's diverse communities are celebrated included and respected. Social connections are strengthened through participation in community groups, clubs, arts, culture nature and physical activity. Everyone can access mental health services, housing, learning and employment.
- **Preventing all forms of violence** - Everyone is able to live free from all forms of violence. Prevention efforts focus on gender equity, while responding to the needs of our population.

Select which areas from the drop-down menu below. (You can select more than one option)

#### Select from the following Priority Areas

- ☐ Tackling climate change and its impact on health
- ☐ Increasing healthy eating
- ☐ Improving mental wellbeing
- ☐ Preventing all forms of violence

#### Explain how your project/event/activity will address the selected priority areas.

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### Risk Management

\* indicates a required field

### Risk Assessment

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For more information about how to complete a Risk Management Assessment for your Project please view the [Risk Management FAQs](#).

### Identified Risks:

Please identify the risks associated with your project and how you plan to mitigate these risks.

You must identify at least one risk and mitigation strategy.

#### Identified Risk 1: \*

Risk is the potential of losing something of value. A situation involving exposure of someone or something of value to danger, harm or loss. At least One potential risk factor should be identified for your project.

#### Identified mitigation for Risk 1: \*

The strategy you will use to avoid danger, harm or loss. How you intend to manage the situation should it occur.

#### Identified Risk 2:

#### Identified mitigation for Risk 2:

#### Identified Risk 3:

#### Identified mitigation for Risk 3:

#### Identified Risk 4:

#### Identified mitigation for Risk 4:



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### Budget

\* indicates a required field

For more information about how to complete a Budget for your project please view the [Budget FAQs](#).

#### Total Amount Requested

\*

Must be a dollar amount and no more than 1000.  
What is the total financial support you are requesting in this application?

#### Total Project/Program Cost \*

What is the total budgeted cost of your project?

### Budget

Income	\$	Expenditure	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
All money that your group will receive as part of this Project. This could include: Hepburn Shire Quick Response Grant, Other Grants, Donations, Cash Contributions, Income Earned such as tickets, sale of products, Fundraising, In-kind and any other income which you must SPECIFY.		All money that your group will spend as part of this Project. This can include: salaries and wages, equipment purchases, marketing and advertising, administration, in-kind and any other expense which you must SPECIFY.	

Which expenditure items will the grant funding be spent on? \*

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### Budget Totals

**Total Income Amount**

This number/amount is calculated.

**Total Expenditure Amount**

This number/amount is calculated.

**Income - Expenditure**

This number/amount is calculated.  
This must equal zero - \$0.

### Supporting Documents

\* indicates a required field

Please upload:

#### Certificate of Currency \*

Attach a file:

A maximum of 1 file may be attached.  
This is Evidence of Public Liability Insurance cover for your Project.

#### Auspicing Agent Letter

Attach a file:

A letter signed by two Committee members for the Auspice Agent confirming they will Auspice this proposal.

#### Quotes

Attach a file:

A maximum of 5 files may be attached.

#### Supporting Information

Attach a file:

A maximum of 5 files may be attached.

#### Permissions

Attach a file:

A maximum of 5 files may be attached.

### Certification and Feedback

\* indicates a required field

#### Certification

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This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

**I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.**

**I agree \***

☐ Yes

☐ No

**Name of authorised person \***

Title

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

**Position \***

Position held in applicant organisation (e.g. CEO, Treasurer)

**Contact phone number \***

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

**Contact Email \***

Must be an email address.

**Date \***

Must be a date

## Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback..

**Please indicate how you found the online application process:**

- ☐ Very easy
- ☐ Easy
- ☐ Neutral
- ☐ Difficult
- ☐ Very difficult

**How many minutes in total did it take you to complete this application?**

**Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.**

