24/25 Quarterly Grants Program - Small Grant Fund

Instructions to Applicants

Small Grants Fund

This grant is designed to assist voluntary and staffed not-for-profit incorporated organisations to fund one-off costs that will directly support the progression of their capacity building activities, projects or programs through small allocations of funding.

General eligibility criteria, information and requirements can be found in the <u>Small Grants</u> <u>Guidelines</u>. **All applicants are strongly encouraged to read these guidelines before proceeding.**

City of Parramatta Council uses the SmartyGrants online system for its grants management. If you have used SmartyGrants for any other grant programs, you can use the same login.

Contacting a Council Officer

We encourage all applicants to have discussed their application with a relevant Council Officer.

Council Officer's Name	
Date of Contact	
Must be a date. Must be a date.	
Applicant Details	
* indicates a required field	
Status	
Is your organisation a not-for-p ○ Yes	rofit organisation? * O No
Is your organisation incorporate Yes	ed? *
Incorporation	
Please indicate which form of in Australian Public Company Company Limited by Guarantee Co-Operative	

Not-for-profit IncorporatedRegistered Australian Body		
Incorporated Organisati	on's Details - The Applicant	
Applicant Organisation Nan	ne *	
ABN *		
The ABN provided will be used check that you have entered the	to look up the following information. ne ABN correctly.	Click Lookup above to
Information from the Australian B	usiness Register	
ABN		
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration		
Tax Concessions		
Main business location		
Must be an ABN.		1
Applicant Postal Address * Address		
Organisation's Website *		
Must be a URL.		

Auspiced Group Details (Compulsory if you organisation is NOT incorporated)

If this project is an auspiced project, the organisation or group being auspiced should fill out this section.

With an auspiced project, Council's primary funding relationship is with the incorporated organisation providing auspice (The Auspice Body).

We recommend an Auspice Agreement to be established between the two organisations. Council can provide advice on what should be included in this agreement.

Council allows and Auspice Fee to be in the project budget, at a maximum of 15% of the

total grant.		
Name of organisation being auspiced		
Auspiced Organisation's Postal Address		
Auspiced Organisation's Primary Email		
As this project is an auspiced project, a leasure arrangements and indicating suptake responsibility for the grant. Please Attach a file:	port for the project	and willingness to
Auspiced Organisation Project Cont	act	
Project Contact's Name		
Position		
Email		
Contact Number		
Contact Number		
Organisation Information		
Introduce your organisation. *		
j j		
No more than 200 words.		
Please describe your organisation's key a	activities *	
. icase acserise your organisation's key t		
We encourage you to use dot points.		

Is your organisation located in City of Parramatta Local Government Area? * ○ Yes ○ No
If yes, please indicate the Council ward your organisation is located in. *
Project Information
* indicates a required field
When answering the following questions, please be specific to the project you are applying for.
Project Title: *
Amount being applied for: * \$ Must be a dollar amount.
Project Start Date: *
Must be a date.
Project End Date:
Must be a date.
Describe your project: *
Describe your project.
Must be no more than 200 words. Provide a short description of your project, what you are proposing to do.
Who is the target audience of your project? *
Please indicate which of Council's priorities your project contributes to * ☐ Having a community focus ☐ Supporting arts and culture celebrations and destinations ☐ Providing opportunities for recreation and leisure ☐ Creating vibrant neighbourhoods and precincts ☐ Promoting green spaces and the environment ☐ Creating a strong economy with a strong city centre ☐ Building strong and innovative community infrastructure for our community's future ☐ Managing growth and transport

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Who are the primary beneficiaries of this project/program? *

No more than 5 choices may be selected. Please choose only the group/s that are at the very core of this project/program

In which locality is your project primarily taking place or providing benefit? *

Activity Category

Please indicate which ONE activity category applies to your project: *

- A: Development of a project that will build resilient, vibrant, and healthy communities in the Parramatta LGA.
- O B: Capital purchase directly related to Community Capacity Building project(s).
- C: Building the internal capacity of your organisation.
- O D: Resource development.

Objectives

The Small Grants Fund is designed to assist voluntary and staffed not-for-profit incorporated organisations with the following:

- Project development and implementation;
- Capital purchase directly related to a discreet and defined activity or project;
- Building the internal capacity of the organisation;
- Resource

The funding has to be linked to a discreet and and defined activity or project:

- OBJECTIVE 1: Support community-based groups and service organisation to develop effective projects that address the social, economic, and/or environmental needs of residents in the City of Parramatta Local Government Area, as described in City of Parramatta's Community Strategic Plan.
- OBJECTIVE 2: Maximise access to and use of community resources, services and facilities, including equity of access for people experiencing social exclusion, marginalisation or isolation.
- OBJECTIVE 3: Encourage community participation in the development and delivery of projects and activities.
- OBJECTIVE 4: Support the development of networks and partnerships between communities, local community groups, agencies and Council.

What will your project do? *

Word count: Briefly list (bullet points) the specific activities that will take place and where they will take place (200
word limit recommended).
Why does this work need to be done? *
Word count:
Describe the specific issue or need you want to address (200 word limit recommended).
How have you included the people you are hoping to work with in the
development of this project? *
Does the project provide opportunities for community members (your target audience) to participate
in or engage with project development, and/or delivery outcome measure development? (200 word
limit recommended.)
Evaluation
Evaluation
What outcomes are you anticipating as a result of your project, and how will you
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What outcomes are you anticipating as a result of your project, and how will you
What outcomes are you anticipating as a result of your project, and how will you measure the outcomes? * Word count:
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What outcomes are you anticipating as a result of your project, and how will you measure the outcomes? * Word count: Must be no more than 300 words.
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Project Contact

* indicates a required field

The project contact needs to be the owner of the project. If there is an auspicing arrangement, the contact person is from the organisation that meets Council's eligibility requirements.

First Name *	
Last Name *	
Decition *	
Position *	
Contact Number *	
Email *	
Alternative Email *	
General Eligibility	
* indicates a required field	
Bank Account Details	
Bank Account Name *	
BSB Number *	
Enter in the format XXX-XXX	
Bank Account Number *	
Also known as ACC.	
Bank Name *	
Domittoneo Empil Address *	
Remittance Email Address *	
Insurance Coverage	

Council requires successful applicant's to have an appropriate level of insurance for any funded project that has the potential to cause harm or loss to those involved.

If your organisation's Certificate of Currency for public liability expires during the course of the project, you will need to submit a renewed certificate of currency for public liability to cover the remainder of the project. This will be written as a condition of your funding agreement.

Please upload a copy of your Certificate o	f Currency Public for Liability Insurance
Attach a file:	
Expiry Date for Certificate of Currency *	
Must be a date.	
Budget	
* indicates a required field	
Other Funding Sources	
In addition to the amount you are applying for costs of your project and how the other parts a	
Are you applying to other funding bodies Yes	for this project? ○ No
What are the in-kind contributions being	made to your project?
Budget	
Expenditure Item	To be paid for by Council Funding
	\$
	\$ \$
	\$
	\$
	\$
	\$ \$
Budget Totals Total Expenditure Amount	

This number/amount is calculated.

Supporting Documents

Upload supporting budget quotations here.

Į	Upload ALL quotations.	*
l	Attach a file:	

Decleration

* indicates a required field

Privacy Personal Information Protection Notice

Purpose of Collection: In order to assess grant applications received in the City of Parramatta Council's Quarterly Grants Program.

Intended Recipients: City of Parramatta Council staff, contractors or consultants appointed for a particular task and City of Parramatta Councillors. Applicant information such as organisation name, project title and amount of project funds allocated by Council will be made more public available if the applicant is successful in receiving funding.

Supply: A grant application is voluntary, however a completed form is required for City of Parramatta Council Staff, contractors or consultants and Councillors to assess grant applications for funding. Council reserves the right not to assess any application which does not provide sufficient information on an organisation or person's identity in order to sufficiently assess its eligibility for funding.

Assess/Correction: Contact the City of Parramatta Council's Grants Officer to access or correct the information provided.

Funding Agreement if Successful

I understand that if my organisation is funded, that the following conditions will apply:

- (i) Grants provided by City of Parramatta Council are for the purpose listed in the application and must be expended during the 2024 2025 financial year.
- (ii) Where a project will involve adults working with children, successful applicants must ensure that they comply with the <u>working with children check regulation</u>. The applicant must provide the City of Parramatta with a letter confirming that they have checked their compliance and the status of any required checks. The letter must be signed by an office bearer of the organisation receiving the grant and provided with this agreement. Evidence of working with children checks can be provided in progress/acquittal reports.
- (iii) Successful applicants are required to work in the spirit of collaboration with Council in the development and delivery of the project throughout the term of the funded project. A Council Officer will be assigned to your project for this purpose (Grant Support Officer).
- (iv) Successful applicants are required to use the grant to principally serve residents in the Parramatta Local Government Area.

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- (v) Acknowledgment of City of Parramatta's support must be given wherever practicable. The sentence "This project has been supported through a City of Parramatta Council Community Grant" in annual reports and advertising material, as well as media releases where appropriate is sufficient to meet this requirement. The logo of City of Parramatta Council will be provided to you if you are successful in your grant application.
- (vi) Approval for extensions of time or alteration to the planned expenditure must be requested through a **Grant Variation form** and sought from Council's Line Manager Community Capacity Building. In the first instance contact should be made with the Council Officer assigned to your project at grants@cityofparramatta.nsw.gov.au.
- (viii) Where practicable, invitations to any promotional events related to the funded project should be forwarded to the Office of the Lord Mayor of Parramatta.
- (ix) Any equipment acquired through this grants program must be insured against theft and fire and must remain in the ownership of a not-for-profit incorporated body, unless alternative arrangements have been approved by Council.
- (x) A Final Report must be completed and submitted when the funds are fully expended. A template will be forwarded to you via SmartyGrants. A financial acquittal that specifies how City of Parramatta Council grant monies were applied must also be submitted with the Final Report. Receipts must be kept and uploaded to the acquittal form. If receipts cannot be obtained, please contact the Community Grants Officer prior to expenditure.
- (xi) All organisations that currently prepare audited financial statements will supply CoP with a copy of these statements, which will specify how City of Parramatta Council grants were applied.
- (xii) Recipients are required to complete a Project Partner Form where requested by Council. This form can be obtained from the Community Grants Officer. Failure to complete this form may delay a receipt of funds.
- (xiii) Any group that experiences difficulty with implementing and acquitting their project should contact the Community Grants Officer for assistance as soon as difficulties are identified, to determine whether the Funding Agreement can be varied.
- (xiv) If the contact person for your project changes you must immediately notify Council and update the details for a new contact person and your Organisation details if necessary. If this is not done within 30 days of the change, Council will request return of any Grant funding.
- (xv) If any of the above conditions are not met, Council may request the return of funds.
- (xvi) If a dispute arises between the parties about this agreement or Council makes a claim under section (xiv) of this agreement, then the parties will endeavour to resolve the dispute by negotiation within ten business days (Negotiation Period). If the parties cannot resolve the dispute within the Negotiation Period, then either party may terminate this agreement by written notice.
- (xvii) The Recipient must return all unexpended funds to Council within 28 business days of the termination of this agreement.

Acknowledgment by Applicant Organisation

By adding my name to this form, I declare that I am an authorised worker of the organisation submitting this application.

I declare that the information in this application, is to the best of my knowledge, true and presents fairly, in all material respects, the financial position of the organisation. I will notify City of Parramatta Council as soon as the organisation becomes aware of any changes to this information or any circumstances that may affect this application but not limited to information regarding the financial viability of the organisation.

I acknowledge that the City of Parramatta Council may seek further information regarding this application if required.

I understand that this is an application only and may not necessarily result in funding.

litle	First Name	Last Name			
Position	*				
Email *					
Must be an	n email address.				
I, the ab		or my organisatio	on, agree to the abo	ve declaration. *	
Date of	acknowledgmen	t: *			
Must be a	date.				
Please	remember to	click SUBMIT.			
application	n. Please rememb			to review your ts will alert you if there	
When you click submit, an email from SmartyGrants will follow to alerts you of your submission. If you do not receive this confirmation, you may not have submitted your application successfully.					
Feedba	ck				
		Parramatta Counc pplying for a grant	il's Grant Programs, Co with us.	uncil is keen to hear	
Where d	id you hear abo	ut Council's Com	nmunity Quarterly Gr	ants Program? *	
How did	you find the on	line application	process? *		

What Webs	-	tion would you lik	e to access from C	ity of Parramatta C	Council's
lf you	spoke to a Co	ouncil Officer, were	e they *		
Any o	ther comment	s or feedback?			