



Community Grants Program – Community Sponsorship Application

PRIVACY COLLECTION NOTICE: South Burnett Regional Council collects your personal information for the purpose of processing this form and for use in any Council matters. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will only be disclosed to a third party as per the South Burnett Regional Council Information Privacy Policy. A hard copy of this electronic document is considered uncontrolled when printed.

Section 1 - Grant program							
This is a cover sheet and summary. Attachments are required. <u>Two</u> (2) funding rounds are provided in <u>August</u> and <u>February</u> each financial year depending on available funding. <u>Applications will be assessed by the Community Grants Program Assessment Panel against the Community Grants Program Policy.</u>							
Section 2 – Applicant/Organ	nisation	1					
Organisation name							
Name of contact person							
Postal address							
Contact person for this applic	ation						
Contact details							
Email							
Is your organisation non-profit / incorporated?		☐ Yes		□ No			
Is your organisation being auspiced?							
ABN				Registered	for GST?	☐ Yes	□ No
What year was your organisa established?	tion						
How many members does yo organisation have?	ur						
Approximately how many peo access your organisation faci services annually?							
Section 3 – Activity							
(Describe the event or project	t)						
Activity name							
Short description							
How will this activity benefit the community?							
Date / commencement of acti	vity						

Section 4 – Location (must be within the boundaries of the South Burnett Regional Council)								
Physical address		g	, , , , , , , , , , , , , , , , , , , ,					
(site of activity)								
Section 5 – Activity budget (an event/project budget must be completed for the application to be assessed)								
Vhat is the total cost for the activity?								
Amount of funding requested from Council								
for this activity. (Refer to Community Grants Program Policy for								
funding available per category)	funding available per category)							
Section 6 – Supporting documents (This form is a cover sheet only. Please attach all requested supporting documents as these are mandatory for assessment)								
☐ Letters of Support (minimum two (2) re	quired)							
 Letters of support cannot be from committee members, members of the organisation or Mayor and Councillors. 								
Copy of Public Liability & Product Liability								
Completed Community Grants Program Budget Form								
☐ Latest Financial Statements attached								
☐ Two quotes for items requested in grant. All quotes to be GST exclusive								
 All written quotes and tax invoices for all expenditure items. Quotes must be on an approved form and total the amount requested in the grant. No screenshots will be accepted. All quotes must be GST exclusive. Excluding costs associated with marketing, advertising and fuel. 								
☐ Other relevant supporting documentation, please list:								
1.								
2. The above documents help to demonstra	ita tha n	and and ha	nofit to the Comm	nunity				
The above documents help to demonstrate the need and benefit to the Community Section 7 - Certification								
	the sta	tements mad	e in this annlicatio	n are true ar	nd correc	nt .		
 I certify to the best of my knowledge that the statements made in this application are true and correct. I understand that approval of support is subject to a signed agreement between the South Burnett Regional 								
Council and the applicant.								
 I understand that the South Burnett Regional Council does not accept any liability or responsibility for the supported project/event and that it is the responsibility of the applicant to provide the appropriate insurance cover. 								
• I agree an activity summary and financial report (acquittal) will be supplied (including a copy of all required receipts and photos) showing funds were fully expended. within six (6) weeks of completion.								
• The Mayor and Councillors are to be invited for the presentation of the cheque and to show Councils support.								
 Councils Logo is to be used on all advertising, flyers and promotions, showing Councils support for your organisations. 								
Applicant		Applicant			Date			
name		signature						
Organisation executive position held								
Section 8 – Lodgement of application Late applications will not be considered. Applications must be postmarked or received by South Burnett Regional Council prior to the closing date advertised.								
Please return your completed form to the following address, or email info@sbrc.qld.gov.au								
			(07)4189 9100					
South Burnett Regional Council PO Box 336, Kingaroy Qld 4610								



Community Grants Program Budget

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Expenditure	Total	SBRC Grant	Income		
A. Activity costs (Please list individually) e.g., equipment, hire, catering,	What is the total cost of each expenditure item?	How much of total cost would be covered by this grant?	Income is the money you are generating to cover the cost of the activity. This includes in-kind contribution and the total SBRC Grant you are seeking. D. Earned income e.g., entry fees, sales etc.		
consumables etc.					
	\$	\$		\$	
	\$	\$		\$	
	\$	\$		\$	
	\$	\$		\$	
Subtotal A	\$	\$	Subtotal D	\$	
B. Promotion and marketing costs (if applicable)			E. Grant income e.g., SBRC, Gambling Community Benefit Fund		
	\$	\$	This SBRC Grant	\$	
	\$	\$		\$	
	\$	\$		\$	
	\$	\$		\$	
Subtotal B	\$	\$	Subtotal E	\$	
C. Administration costs e.g., insurance, event organiser etc.			F. Your own contribution (In-kind value and/or \$) e.g., the difference between expenditure and income that the columns equal		
	\$	\$		\$	
	\$	\$		\$	
	\$	\$		\$	
Subtotal C	\$	\$	Subtotal F	\$	
TOTAL EXPENSES A+B+C= X X must = Y	\$	\$	TOTAL INCOME D+E+F=Y Y must = X	\$	