**BYRON SHIRE COUNCIL**

**COMMUNITY INITIATIVES PROGRAM**

**APPLICATION FOR COMMUNITY DONATION**

**2017/18 AND 2018/19 Financial Years**

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| **APPLICANT INFORMATION** | |
| ***Applicant Organisation Name*** | The applicant is the Organisation applying or auspicing the project. |
| ***ABN*** | If you do not have an ABN a ‘statement by supplier’ form will be required. |
| ***If auspicing, who are you auspicing for?*** | Please provide names of people you are auspicing for. |
| ***Proof attached of (applicable documents):*** | Not-for-profit status  Tax exemption status  Registered as Deductible Gift Recipient? |
| ***Provide information on the legal structure of your Group/Organisation*** | (E.g. not-for-profit incorporated association with a volunteer board and 1 paid coordinator) |
| ***Contact Person for this application*** |  |
| ***Physical Address*** |  |
| ***Postal Address*** |  |
| ***Website*** |  |
| ***Email Address*** | (Note: all notifications and contact will be by email) |
| ***Telephone contact no.*** |  |
| ***Acknowledgement*** | I have read the Policy: Community Donations under Section 356  I have read the Community Initiatives Program Guidelines |
| ***I confirm the following are attached – if applicable for my application.*** | Project Plan including project budget  Proof of 50% of matched contribution  Financial information to assess the financial viability of the organisation (A copy of the groups/ organisations most recent annual report and/or audited financial statement).  Public Liability insurance to the value of $20 million. |

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| **PROJECT INFORMATION** | | |
| 1. ***Donation Amount Requested*** | **$** | |
| 1. ***Type of donation requested*** | Community Initiative  Reimbursement of Council fees  Award presentation for educational institution | |
| 1. ***Purpose of Donation / Project Outline (100 words max)*** |  | |
| 1. ***Have you attached a Project Plan? (If so, you may have already answered questions 5 – 10 below.)*** | Yes  No | |
| 1. ***Relation to identified needs and priorities in the current Delivery Plan/ Operational Plan*** |  | |
| 1. ***The impact the project will have on the community or groups/persons (the beneficiaries). (100 words)*** |  | |
| 1. ***Number of proposed beneficiaries from the project or services*** |  | |
| 1. ***How will the project involve local residents? How does the project demonstrate community self-help and strengthen connections in the community? (100 words)*** |  | |
| 1. ***How does the project promote interaction of diverse parts of the community? How do you plan to work with other people/ groups in delivering the project? (100 words)*** |  | |
| 1. ***Proposed budget for the project***   ***(If more room required, please attach a separate page)*** | |  |  |  |  | | --- | --- | --- | --- | | **Income** | **$** | **Expenditure** | **$** | | Council donation | $ |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | TOTALS |  |  |  | | |
| ***Which category most suits your project (choose only one).*** | Community event  Environment/ gardens  Local arts/ culture  Community Buildings  Community development/ wellbeing  Recreation/Sport  Community leisure spaces/ activities  Other | |
| ***Please indicate which community of interest will benefit from the project*** | Bangalow  Brunswick Heads  Byron Bay  Mullumbimby  Ocean Shores/ New Brighton  Rural Area  Whole of Byron Shire  Comment: | |
| **DONATION INFORMATION** | | |
| ***Have you made application for any other financial assistance from other funding bodies for this project?*** | | No  Yes If yes provide details |
| ***If only a part of the donation requested is granted will you / your organisation be able to proceed with the proposed project?*** | | No  Yes If yes provide details on how this will happen |

**Please provide details of Donations given to your Organisation by Council and/or other bodies over the last three years.**

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| --- | --- | --- | --- |
| ***Date*** | ***Amount*** | ***Donation from*** | ***Purpose to which funds put*** |
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| --- | --- |
| ***Any other Information to support the Application*** | [Please attach any further information or relevant material with this application] |

**Authorisation of Applicant**

I certify that, to the best of my knowledge, the information in this document and any attachments is true and correct. I confirm that this application has been submitted with the full knowledge and support of the applicant organisation listed above. I understand that I may be required to provide additional information if requested by Byron Shire Council. I understand that Byron Shire Council may use the information in and attached to this document.

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| --- | --- | --- |
| **Print name** |  | |
| **Position (if applicable)** |  | |
| **Signature** |  | **Date** |

**Applications to be received by 18 May 2018**

**Return completed application to**

Email [council@byron.nsw.gov.au](mailto:council@byron.nsw.gov.au) Byron Shire Council, PO Box 219, Mullumbimby NSW 2482

Enquiries: Joanne McMurtry, Community Project Officer Tel 6626 7316 or email [joanne.mcmurtry@byron.nsw.gov.au](mailto:joanne.mcmurtry@byron.nsw.gov.au)

**ATTENTION: Applicant/ Privacy Notification Form**

The personal information that Council is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 (“the Act”). The information may only be made available through this or other relevant Acts and Regulations that may apply.

The intended recipients of the personal information are:

🡪 officers within the Council; 🡪Council agendas; Agents or data service providers engaged by the Council

The supply of the information by you is voluntary. If you cannot provide or do not wish to provide the information sought, the Council will be unable to process your application.

Council is collecting this personal information from you in order to process this application for a donation.

You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such application in accordance with the Act. Enquiries concerning this matter can be addressed to the Records Coordinator, Byron Shire Council, Station Street, Mullumbimby or telephone 02 6626 7322. Council is to be regarded as the agency that holds the information.

Acknowledge

**Signed Applicant/Owner …………………………………………….…….. Dated**