Form Preview

Introduction

Before completing this application

1.Please refer to the **Quick Response Grant Program Guidelines**

If required, discuss your project with the Grants and Funding Officer on 03 9209 6777 or grants@portphillip.vic.gov.au

Completing the application

- Save regularly to avoid losing your work you can return and work on the application any time prior to submission.
- Navigate the form by clicking **Next Page** or **Previous Page** or using the index list.
- Having trouble answering a question? Look below each question for hints to help you answer the question.
- If submitting multiple applications, consider having general information e.g. description about your organisation in a word document to cut and paste into each application.
- When you submit the application, you will receive a confirmation email with a PDF copy of the submitted application.
- After submission, changes can not be made to the application.
- After submission, you can also return to **https://portphillip.smartygrants.com.au** at to view a copy of the submitted application.

Documentation required to be uploaded in this form:

- Evidence of being a City of Port Phillip resident for a minimum of 6 months.
- A letter or invitation from the hosting organisation as evidence of the request to participate in the event or activity.

Eligibility

Eligibility Checklist

Be a resident of the City of Port Phillip for a minimum 6 months (evidence required).

Yes

Have complied with all terms and conditions including the submission of a satisfactory project status and acquittal report for any previous City of Port Phillip Grants.

Yes

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If you answered **No** to the above eligibility question please do not proceed with this application. If you have any questions please contact the Grants and Funding Officer on 03 9209 6777 or grants@portphillip.vic.gov.au

Child Safe Standards

The City of Port Phillip has zero tolerance for child abuse and we are a committed Child Safe organisation. Our commitment is to ensure that a culture of child safety is embedded across our community to safeguard every child and young person accessing City of Port Phillip. All grant applications that work directly with children and young people are required to comply with legislation and regulations relating to child safety including but not limited to the *Working with Children Act 2005* and the *Working with Children Regulations 2016* and the Victorian Child Safe Standards (CSS) .

All grant applications that work directly with children and young people that are not compliant with the <u>Victorian Child Safe Standards</u> or be actively working towards compliance to the satisfaction of the Commission for Children and Young People, will not be eligible to receive funding under the Community Grant Program. For more information on the Victorian Child Safe Standards please refer to the above link.

For more information on how CoPP is creating a child safe Port Phillip please <u>Contact us -</u> City of Port Phillip .

Applicant Details

* indicates a required field

Applicant *
First Name Last Name

Applicant Home Address *
Address

Address Line 1, Suburb/Town, and Postcode are required.

Applicant Postal Address
Address

Applicant Primary Phone Number

Must be an Australian phone number.

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Applicant Primary Email *
Must be an email address.
Applicant Mobile Phone Number *
Must be an Australian phone number.
Event or Activity Details
* indicates a required field
Project Title *
Brief description of event or activity: *
Word count: Must be no more than 50 words. This will be used in publications if your application is successful
Where will the event or activity take place: *
Faculties Anti-like Chart Bate *
Event or Activity Start Date *
Must be a date. Projects must start no earlier than 8 weeks from time of application
Event or Activity End Date (if applicable)
Must be a date.
event must not take place later than 30/06/2024
Participation Details
Describe the need to attend this event or activity: *
Word count: Must be no more than 200 words.

Describe the barrier to participate in the event or activity: *

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Word count:		
Must be no more than 200 words.		
What will be the benefits fo participating in the event o	r the individual and or Port Phill r activity: *	ip community with
Mond count		
Word count:		
Must be no more than 200 words		

Event or Activity Budget

* indicates a required field

Grant request

Your project income budget will include details of all proposed event or activity income e.g. inkind, fundraising etc.

Applicants will then specify which items of expenditure City of Port Phillip grant money will be used for.

There are many resources that can help you with writing a budget including Our Community Website

Total Amount Requested *

\$

Must be a dollar amount and no more than 500.

What is the total financial support you are requesting from City of Port Phillip in this application?

Budget

Income	\$ Expenditure	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Budget Totals

Total Income Amount	Total Expenditure Amount	Income - Expenditure
\$	\$	\$
This number/amount is	This number/amount is	This number/amount is

Documentation

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*	ind	icates	a red	quired	l fiel	ld

Please upload evidence of being a City of Port Phillip resident for a minimum of 6 months *
Attach a file:
Please provide at least 2 documents with proof of address (bank statements, utility bills, or rental receipts etc), one from the past month and one from at least 6 months prior to applying
Please upload a letter or invitation from the hosting organisation as evidence of the request to participate in the event or activity: *
Attach a file:
Declaration
* indicates a required field
I certify that all details supplied in this application form and in the attached documents are true and correct to the best of my knowledge. I have read the Quick Response Grant Program Guidelines and understand the information contained within it forms part of the conditions of payment if this application is successful. I agree to contact the City of Port Phillip in the event that any information regarding this application changes or is found to be incorrect.
Declaration of applicant * First Name Last Name
Do you agree with the above statement * O Yes
The personal information requested on this form is being collected by the council for the Quick Response Grant Program. The personal information will be used solely by the council for that primary purpose or directly related purposes. If this information is not collected the application will not be considered eligible, and therefore will not be considered during the assessment process. The applicant understands that the personal information provided is for the verification of QRGP application and correspondence purposes and that he or she may apply to the council for access to and/or amendment of the information.
Applicant Feedback
How did you hear about the Quick Response Grant Program? □ Social Media □ Email or Newsletter from City of Port Phillip □ Council Website □ Other:

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□ Wor	d of Mouth			
How ca	an the Quick Respo	nse Grant Prograr	n be improved?	
Any ot	her comments?			