

COVID19 COPACC Assistance Application Form

Form Preview

Guide for Applicants

Getting Help

The Business Support Officer is available if you require assistance applying online, or have questions about your application.

Contact the Business Support Officer on (03) 5232 9400 or EcoDev@colacotway.vic.gov.au

Please allow sufficient time to complete your application by 5pm on Friday 28 August, 2020

Smartygrants provides an easy way for grant seekers to complete their application form online. The [help guide for applicants](#) will explain the essential steps you need to take to complete and submit a form. You can also download it in PDF. There is also an [Applicant FAQ](#) page available.

Checklist before you start

You may require the following before starting your application.

- Read and understand the program guidelines before completing the application.
- Prepare your budget - list all Income and Expenses
- Have you got a dollar for dollar matching contribution.
- A scanned or digital copy of your bank statement or financial statements to be able to demonstrate financial viability
- Public Liability Insurance Certificate of Currency for the activities that are the subject of this grant.
- Quotation from COPACC for venue hire for your program or event expenses.
- Letter of consent from an auspicing body if required.
- ATO Statement by a Supplier if required (refer to Grants page on Council's website).
- Check applicant has completed all Acquittal Reports and none are outstanding or money owed to Colac Otway Shire as a result of previous funding or grants. If these are outstanding please discuss with the Grants Officer before proceeding with the application.

Applicants Please Note

Before completing this application form, you should have read the **COVID19 COPACC Hire Assistance Grants Program** guidelines. [CLICK HERE](#)

Incomplete applications and/or late applications will not be considered.

Eligibility

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* indicates a required field

Eligibility

This section of the application is designed to help you, and us, understand if you are eligible for this grant. It's important 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 regards to these eligibility criteria, please contact the Business Development Officer on (03) 5232 9400 or EcoDev@colacotway.vic.gov.au

I confirm that the applicant...

- has read and understands the program guidelines
- is a non-government organisation
- is a performing arts business in the Colac Otway Shire
- has completed all Acquittal Reports to Colac Otway Shire relating to any previous grant funding. If you have any outstanding Acquittals, please contact the Grants Officer to discuss before applying.
- has the appropriate type and level of insurance for the activities that are the subject of this grant
- will not commence the program or event prior to being notified of the outcome of this application.
- is planning a performance in either the COPACC Auditorium or Civic Hall black box space in the 2020-2021 financial year.

Please confirm

*

- ☐ Yes, I confirm all eligibility statements are true and correct
- ☐ No, I do not meet all of the eligibility criteria, and therefore should NOT proceed with the application.

No more than 1 choice may be selected.

You may contact the Grants Officer on (03) 5232 9400 if you have any queries about your eligibility for the program.

Contact Details

* indicates a required field

Applicant Details

Organisation name *

Organisation Name

Organisation Address

Address

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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, Committee Member, Fundraising Coordinator. Ensure you are authorised to act on behalf of the Applicant Organisation.

Primary phone number (prefer a mobile number) *

Must be an Australian phone number.

Back-up phone number

Must be an Australian phone number.

Primary contact person's email address *

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

Organisation Details

* indicates a required field

Australian Business Number

Does your organisation have an ABN? *

☐ Yes

☐ No

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)

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DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from [the ATO](#).

Please upload completed Statement of Supplier Form:

Attach a file:

Max 25mb

Are you a performing arts business featuring dancing, singing or acting activities?

*

☐ Yes

☐ No

☐ Other:

Is your organisation incorporated? *

☐ Yes, incorporated

☐ No, not incorporated

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.

If YES, provide your organisation's incorporation number? *

Incorporated Association or Australian Corporation Number

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.

Tell us about your Performing Arts Business or Organisation

* indicates a required field

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Members

How many Members? *

How many Volunteers? *

Do you employ any Paid Staff?

☐ Yes

☐ No

'Paid Staff' includes paid employees, workers, personnel, hired hands, labourers, office workers, as opposed to paying fees for service, or contracting work.

Paid employee details

How many Paid Staff? *

Which positions are paid?

Do have less than 20 FTE staff? How many are Full-time, Part-time, or casual?

Full Time Equivalent (FTE). Do not include contractors who are engaged

Insurance

What insurance does your organisation have in place? *

☐ Public Liability Insurance

☐ Volunteer Insurance

☐ Other:

Provide a Certificate of Currency of the insurance *

Attach a file:

Can upload more than one type of insurance, if held

Auspice Information

*** indicates a required field**

Auspice Organisation Details

Name of auspicing organisation *

Organisation Name

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Auspicing organisation's website

Must be a URL

Primary contact person at auspicing organisation *

Title

First Name

Last Name

We may contact this person to verify that this auspicing arrangement is valid and current.

Auspice Primary Address

Address

Position held in organisation

e.g. Manager, CEO

Contact person's primary phone number *

Contact person's back-up phone number

Contact person's email address *

Must be an email address

Please attach a letter from the auspicing organisation confirming this arrangement is valid and current *

Attach a file:

Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.

Does the auspicing organisation have an Australian Business Number (ABN)? *

☐ Yes

☐ No

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.

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Information from the Australian Business 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

As the auspicing organisation does not have an ABN, please submit a completed ATO Statement by a Supplier form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from: [Statement by a supplier - ATO form](#)

Please upload a completed Statement of Supplier form

Attach a file:

Max 25mb

What is the Incorporation Number of the Auspice Organisation?

You can search for this through Consumer Affairs Victoria. <https://www.consumer.vic.gov.au/clubs-and-fundraising/incorporated-associations/search-for-an-incorporated-association>

Program or Events Details

* indicates a required field

If your application is successful, the details you provide below will be published on Council's website, facebook page and local media.

- Name of the Applicant organisation
- Title of the event
- Description of the event and intended outcomes
- Amount of funding awarded.

Program or Event Title *

Provide a name for your Event. Your title should be short and descriptive

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Please provide a short description / summary of your Program or Event *

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Word count:

Must be no more than 50 words.

Be short and descriptive.

Will your program or event be held in the auditorium or Civic Hall black box space? Provide details of rooms booked *

--

Anticipated start date *

--

If unknown, provide your best guess

Anticipated end date *

--

If unknown, provide your best guess

Description of Program or Event activities. What are the major steps/activities involved in delivering your program or event?

Provide details on the activities that will be undertaken. Summarise the individual items that the project will deliver. Add up to 6 activities.

What Marketing and Promotional Opportunities will be available to Colac Otway Shire for your event?

List up to 6 sources of marketing or promotional activities that you will use to promote the support provided by the Colac Otway Shire.

What evidence do you have that this program or event has community support? *

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Go to the Funding Centre's Answers Bank at <https://www.fundingcentre.com.au/answersbank#Qu7> if you need some ideas about how to frame your response.

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Please upload letters of support (if available or relevant)

Attach a file:

A maximum of 5 files can be attached

Will your project address gender inequality?

☐ Yes

☐ No

☐ Don't know

Answer 'yes' if your project/program is specifically designed to improve opportunities for people who identify as women and girls, or you think this may occur as a side-benefit to your initiative.

How will your initiative address gender inequality? *

What will you do to address gender inequality and what changes do you expect will occur as a result?

Budget

* indicates a required field

Outline your program or event budget in the income and expenditure tables below, including details of other funding that you have applied for, comment whether it has been confirmed or not.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' Comments columns. Details of expenses should include all program or event costs.

Use the 'Comments' column to mark the items that the grant funds will be spent on. Describe the item and include any additional information you think we should be aware of.

For expense items, Quotes will need to be provided in the file upload area below the tables.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

All in-kind contributions should be recorded as Income and the same value recorded as Expenditure.

Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

Grant Amount Requested *

\$

Must be a dollar amount.

What is the total grant amount that you are requesting?

Budget

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Income \$ **Expenditure - mark \$**
grant expenses with

Grant requested	\$		\$
Your cash contribution			

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.

Quotation required

Provide a COPACC quote to verify the VENUE HIRE ONLY costs of your program or event.

The grant is available for up to 50% of the VENUE HIRE costs only, up to a maximum of \$2,000.

Please attach COPACC quote for expenditure (cost) items *

Attach a file:

A minimum of 1 file must be attached.

Quotes must be dated within the last 3 months. Detailed cost estimates must show how you have calculated the costs.

Details of In-Kind Contribution

In-kind contributions are non-cash contributions towards your total event value. In-kind contributions must directly relate to delivering the program or event activities. The in-kind contributions should not include any activity undertaken prior to the commencement of the project (eg: administration and grant application is not eligible to be included in the in-kind contribution).

The value of in-kind contribution for the application budget should be calculated as follows:

- \$25 per hour for volunteer general labour
- \$45 per hour for volunteer specialist labour (eg: lighting technician or sound engineer, architect, qualified trades)
- Provision of goods or plant/equipment is normally calculated at the retail or market price that the goods/plant/ equipment would have been bought or hired for.

Description of equipment or service, Number of Hours of in-kind contribution **\$ hourly rate (\$25ph or \$45ph)** **Total In-Kind value**

Provide details of type of labour and number of voluntary hours.		Must be a dollar amount.
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Provide details of donated goods or services		
	\$	\$

Details of Cash Contribution

Cash contribution can be confirmed by providing the following details:

- Provide a recent bank statement or Treasurer's report for the past two (2) years

Bank Statement and/or Treasurer's Report *

Attach a file:

Please provide evidence of your contribution. Refer to Guidelines under 'Cash Contribution'.

Assessment Criteria

* indicates a required field

Has your organisation received funding from Council in the past three (3) years?

Provide details of funding support by Colac Otway Shire.

Year	\$ Amount
	\$

		\$

Assessment Criteria - Events at COPACC

To be competitive you will need to score highly against each assessment criteria. The assessment criteria are weighted as indicated by the guidelines.

The amount of details and supporting evidence you provide should be commensurate with the event size, complexity and grant amount requested.

You may attach other documents that support your application and/or claims made in relation to the assessment criteria, noting that the total file size of all attachments to the application cannot exceed 10MB.

Assessment Criteria 1 - WHAT benefits will the event/performance provide to your organisation and the broader community? (Weighting 50%) *

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Word count:

Must be no more than 500 words.

You may wish to provide a response to the following: What are the anticipated benefits of the event to the community? How is the event/performance supporting the local community? How will this event benefit your organisation? Details of short term and long term benefits. The expected number of people who will benefit from or attend the event. The benefit for current and future generations.

Assessment Criteria 2 - WHY is this event needed? (Weighting 20%) *

Word count:

Must be no more than 250 words.

You may wish to provide a response to the following: How will this event support your organisation to recover from COVID19 market conditions? What demand exists that has created the idea for this event/performance? Provide evidence to show why this approach will meet the aforementioned demand? Will the project address gender inequity?

Assessment Criteria 3 - HOW will the event be delivered? (Weighting 15%) *

Word count:

Must be no more than 250 words.

You may wish to provide a response to the following: Who will manage the event/performance? What planning has been undertaken to run the event/performance? Detail the stages involved in your event/performance and how you will propose to deliver it. Detail if it involves knowledge and skills development. Will the project be an innovative and creative response to community needs? Demonstrated experience of the Applicant organisation or individual to deliver and acquit the project within the timeframes.

Assessment Criteria 4 - WHO is involved? (Weighting 15%) *

Word count:

Must be no more than 250 words.

You may wish to provide a response to the following: Will there be voluntary or in-kind contributions? How many people from your organisation will be involved? Does the project actively involve a range of stakeholders? Who is the target market to benefit from your event? Include both participants and the target audience.

Letters of Support (if relevant/needed)

Attach a file:

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Provide an estimate of the expected numbers participating in your program or attending your event *

Must be a number.

Comment on how you estimated numbers *

Eg: Based on attendance at previous events or comment how you arrived at this number

Certification and Feedback

* indicates a required field

Privacy Notice

The Colac Otway Shire Council is committed to protecting your privacy. We collect and handle any personal information about you or a third party in your application, for the purpose of administering your grant application and informing the public of successful applications.

In order for us to administer your grant application effectively and efficiently, we may need to disclose your personal information with others for the purpose of assessment, consultation, and reporting. This can include Council staff or Councillors.

Any personal information about you or a third party in your correspondence will be collected, held, managed, used, disclosed or transferred in accordance with the provisions of the *Privacy and Data Protections Act 2014 (Vic)* and other applicable laws.

The Council will publish information on individual grants in the public domain, including on Council's website and social media, unless otherwise prohibited by law.

Smartygrants Privacy Policy

[Click Here](#) to view the Smartygrants Privacy Policy

Applicant Declaration

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 not misleading, 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 Funding Agreement.

I declare that I have read and understood the program guidelines, including the privacy disclosure provisions as outlined above.

I declare that the applicant will comply with, and require that its subcontractors and independent contractors comply with all applicable laws and regulations including the Building Code and Workplace Health and Safety regulations.

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I acknowledge that I may be requested to provide further clarification or documentation to verify the information supplied in this form.

I acknowledge that it is the Applicant's responsibility to obtain any permits required and that the successful outcome of this application does not override any of these requirements.

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, Secretary, Committee member etc)

Organisation *

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?

Estimate in minutes i.e. 1 hour = 60 minutes

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

