

**Annual Community Matched Funding**

**Application**

**For Projects Delivered: June 2022 – June 2023**

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| **APPLICANT DETAILS**  |
| **Association/Organisation Name**  |   |  |
| **Incorporation Status**  | Incorporated  | Non- Incorporated  |
| **If not Incorporated, Auspice Details**  |  |   |
| **Project Name**  |   |  |
| **Contact Person for Initiative**  |   |  |
| **Position Held**  |   |  |
| **Postal Address**  |   |  |
| **Contact Number**  |   |  |
| **Contact Email**  |   |  |
| **Australian Business Number (ABN)**  |   |  |
| **GST Registered**  | Yes ☐  | No ☐  |
| **Does your organisation operate on a not for profit basis?**  | Yes ☐ | No ☐ |
| **Total Amount Requested from the Shire of Broome (ex GST)**  | **$**  |  |
| **Total Amount Contributed by Applicant or Other Funders (ex GST)** |  |  |
| **Total Volunteer Hours Contributed by Applicant** |  |  |

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| **PROJECT DETAILS**  |
| **Project Name**  |   |  |
|  **Project Summary**(max 400 words)*Tell us about your project. What is the concept? Describe your approach. Who are the key contributors?* |  |   |
| **Project Outcomes** (max 200 words)*What will the project achieve? Why should this project be supported?* |  |  |
| **Project Start Date**  |   |  |
| **Project End Date**  |   |  |
| **Target Audience**  | ☐ Children (12 years and under) ☐ Young people/youth (12-18 years) ☐ Women ☐ Men ☐ Older People (55+ years) ☐ Aboriginal and Torres Strait Islander people ☐ People from culturally and linguistically diverse (CALD) backgrounds ☐ People with a disability ☐ Low-income families ☐ All of the above ☐ Other (please specify below)  |  |

 **GRANT EXPENDITURE DETAILS**

**Please complete the table below.**

**Any item over $2000 for which funding is requested from the Shire of Broome MUST be accompanied by a corresponding written quote.**

|  |  |  |  |
| --- | --- | --- | --- |
|  **Item**  | **Total Cost****(ex GST)** | **Contribution requested from the Shire of Broome (ex GST)** |  **Other Contributions** |
| **Contributor** | **Amount (ex GST)** |
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| **TOTAL:**  |  |  |  |  |

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| **OTHER DETAILS**  |
| **Supporting Documentation** ***Please list all supporting documentation attached to your application (quotes, copy of incorporation status, letters of support, evidence of consultation etc)***  | 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
|  **Application Checklist** ***Please list all supporting documentation attached to your application (quotes, copy of incorporation status, letters of support, evidence of consultation etc)*** | ☐ Completed all sections of the application, including a detailed budget☐ Included a copy of Certificate of Incorporation (if part of an auspice agreement with another organisation, please include a letter of confirmation to administer the funding and a copy of their Certificate of Incorporation)☐ Included a financial statement for the most recently completed financial year (an audited financial statement may be requested)☐ Included evidence of public liability insurance (Certificate of Currency)☐ Provided quotes for any purchase over $2,000☐ Included letters of support from community groups and / or other organisations☐ Retained a copy of this application for your records |

**Please return your completed application form using one of the following options:**

* Email to shire@broome.wa.gov.au
* Hand deliver to Shire of Broome Administration Office, 27 Weld Street, Broome

For enquiries or to discuss your application please contact Shire of Broome Youth and Community Development Officer on

(08) 9191 3456.

**APPLICATIONS CLOSE 4:00pm Monday 6th April 2022**