

\* Required before final submission

## Welcome to FRRR's online application form for the Community Group Futures (CGF) Program.

### Tips for using the Community Group Futures (CGF) program online application form:

- To assist in managing versions and to reduce the risk of losing work if an internet connection times out, we recommend preparing your application content in a Word document and then transferring your final application content to this Grants Gateway form. Please [click here](#) for a print friendly version of this application form.  
Working offline also makes it easier for multiple people to work on an application before entering your application into Grants Gateway for submission.
- Remember to continually save your work in the online form as you move through the sections.
- Please refer to the Guidelines for further information to support you to complete the application.**
- As always, if you require assistance to complete this online application form, the friendly FRRR staff are only a phone call away on Free Call 1800 170 020.

[Save & Finish Later](#)

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## Community Group Futures Program – Round 9 2019 Opens Wednesday, 7 August 2019, closes 5pm AEST Wednesday, 11 September 2019 (For projects December 2019 – December 2020)

### How to complete this section:

**\*\*Does your organisation, the group delivering the project, have an ABN or Inc number?**

If **YES**, please complete part:

- Legal organisation - provide information about **your local group**
- Delivery organisation - leave this blank

If **NO**, please complete part:

- Legal organisation - provide information about **the organisation partnering with your group / your head office / governing body**
- Delivery organisation - provide information about your local group

### A. Legal Organisation

### Organisation - Name and Address

\* What is the legal name of the organisation?

\* Postal address Line 1

Postal address Line 2

\* Town

\* State

\* Postcode

### Organisation - Legal & Tax Status

Please click on this link from the Australian Government ABN Lookup site to complete the following organisation details [ABN Lookup](#)

\* Is your organisation registered with an ABN?

Organisation ABN

\* Select Organisation Entity type, as per your ABN Lookup

Is the organisation registered for GST?

\* Does your organisation hold any of the following? Select all that apply.

☐ ACNC ☐ DGR1 ☐ DGR2 ☐ DGR4 ☐ TCC ☐ N/A

\* Is your organisation an Incorporated Association?

If yes, what is the Incorporated number?

\* Which State / Territory authority is your organisation registered with?

### Organisation - Head of Organisation

These contact details should reflect the person who is the head of the organisation (e.g Chair, President, CEO) as they MUST authorise the application, NOT a subcommittee Chair, Secretary, Treasurer or Program Manager.

Important: Our correspondence regarding the outcome of your application will be sent here. If your application is successful, we will request Electronic Funds Transfer information from the contact listed here.

\* Title

\* First name

\* Last name

\* Position held

\* Bus Hrs Phone No.

Format: XX XXXX XXXX

\* Mobile No.

Format: XXXX XXX XXX

\* Email

### Organisation - Project Contact

This person will be contacted if we have any questions about your project / application.

Title

First name

Last name

Position held

Bus Hrs Phone No. Format: Format: XX XXXX XXXX	Mobile No. Format: XXXX XXX XXX	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Organisation - Overview

* In what year was your organisation founded?	* Current number of employed staff
<input type="text"/>	<input type="text"/>
* Current number of volunteers	* Current number of committee members
<input type="text"/>	<input type="text"/>

\* Provide a brief overview of your organisation.  
If you do not have a website, please provide a brief overview of your organisation. Mission, major programs / activities, users of your facilities, engagement with other community groups, key partnerships.

#### Organisation - Internet & Social Media

FRRR would like to link with your organisation through social media. Can you please provide us with the following, where applicable.

Website Address	Facebook Address
<input type="text"/>	<input type="text"/>
Twitter Handle	
<input type="text"/>	

Important: Only complete Part B if you are partnering with an organisation who will receive and hold grant funds.

## B. Delivery Organisation

#### Delivery Organisation - Name & Address

Organisation name	<input type="text"/>	
Postal address Line 1	<input type="text"/>	
Postal address Line 2	<input type="text"/>	
Town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Delivery Organisation - Overview

In what year was your organisation founded?	Current number of employed staff
<input type="text"/>	<input type="text"/>
Current number of volunteers	Current number of committee members
<input type="text"/>	<input type="text"/>

If you do not have a website, please provide a brief overview of your organisation. Mission, major programs / activities, users of your facilities, engagement with other community groups, key partnerships.

FRRR would like to link with your organisation through social media. Please provide us with the following, where applicable.

Next

Exit

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*What, why, when, where, who and how of your project.*

Please identify which stream of the Community Group Futures Program your project relates to.

(Please click [here](#) and refer to the table on page 2 of the Program Guidelines)

- ☐ Organisation Capability    ☐ Viability and sustainability    ☐ Cost Efficiencies for Community Infrastructure

Please provide a summary of the key aim/s of your project and what the funds will be used for.

Word count 0 of 50

FRRR needs your help to better understand the issues communities plan to tackle with the support of an FRRR grant. This is important information for us, in reporting back to our donor partners and in building the case for more support. Please follow the three steps below to identify your Project Activity Area.

1. Identify Project Activity Area. To do this click on **Project Activity Tree** and follow the instructions on page one.
2. Type in the number you identified into the search box and click search.
3. Select your activity area from the drop-down menu.

Reset



(What is your project about? What will you actually do? What exactly will the funds pay for? What are the key activities that will be undertaken, and when? Where will the project happen, if on government land, describe the relationship and permissions required. Who will be involved as supporters or partners? How will they be involved? What will they contribute? Please attach relevant documentation such as quotes, plans, reports etc. NOTE: Purely sporting or social projects are not charitable and are not eligible.)

**Please note that the funds will not be received until December 2019, and projects can't be funded retrospectively.**

What is the current problem / need / opportunity that your project seeks to address? What is contributing to this problem / need in the community? To what extent is the problem affecting the community? What local evidence and / or data demonstrates this? You can upload support materials such as letters of support, community plans/data, survey results, media clips, photos etc to help demonstrate need in the Supporting Materials section.

**WHEN** will your project happen?

Provide exact or approximate start and end dates for your project, including when key activities will happen. Funds will not be available until **December 2019**.

**WHERE** will your project happen?

Please tell us the following information about where your project will happen. For projects happening in more than one location, please indicate these in rows 2-4. If your project is happening nationally please place "National" under Town Name.

e.g. Collie → NSW → 2827 → 109

* Town	State	* Postcode	* Population
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>

Which Local Government Areas will this project cover?

Select, up to 4 Local Government Areas.

\* Please follow the two steps below to identify the Local Government Area(s) for the Project location(s) listed in the previous question.

1. Type in the Local Government Area into the search box and click search.
2. Select the Local Government Area from the drop-down menu.

Search

Reset

- Select One -

▼

Search

Reset

- Select One -

▼

Search

Reset

- Select One -

▼

Search

Reset

- Select One -

▼

\* Briefly describe the main features of the community / communities where your project will occur.

e.g. demographics, employment, community activities, key clubs and organisations, economics, community & cultural diversity, festivals / events etc.

✓

✳ **WHO** will benefit and be involved?

Who will benefit in the community (i.e. the broader community or a specific target group)? How are they affected by the issue? How will the people who benefit be involved in the development and delivery of the project? Who else (partners, community members etc) will be involved and why are they best placed to support the project? What is the approximate number of people that will directly benefit?

Where relevant, please select the **most appropriate target group** options below:

**Age Group**

- ☐ Children (0-4)  
☐ Children (4-12)  
☐ Young people (12-24)  
☐ Adults (25-59)  
☐ Older people (60+)  
☐ All Ages

## Gender

- ☐ Female
- ☐ Male
- ☐ All Genders
- ☐ Gender Neutral

\* Does your project involve working directly with children / youth under 18?



✖ Does your organisation have policies and procedures regarding working with children, Working with Children Checks, and the handling of child abuse complaints?



**HOW** will your project benefit the community?

\* Choose the **ONE** option that best describes HOW you will create the change you would like to see:

- ☐ Investing in Infrastructure and Equipment
- ☐ Building Organisational Capacity
- ☐ Developing Awareness, Knowledge and Skills
- ☐ Providing Access to Services / Activities

\* Please identify the project's primary outcomes. (you can tick up to three)

FRRR needs your help to better understand and track the outcomes of FRRR grants in rural, regional and remote communities around Australia. This is important information to support FRRR to report back to our donor partners and build evidence for more support.

- ☐ Communities that can innovate or respond to local opportunities / issues
- ☐ Greater ability to deal with / respond to individual / community level challenges
- ☐ Stronger local economies
- ☐ Improved financial security / reduced poverty or financial stress
- ☐ Enhance community identity / wellbeing / sense of place
- ☐ A friendly and inclusive community / stronger social fabric
- ☐ Promote environmental health / sustainability
- ☐ More creative / culturally vibrant communities
- ☐ More engaged / participative community
- ☐ Optimal start in life for children, starting school ready to learn
- ☐ Increased engagement in learning and improved education outcomes
- ☐ Stronger individual and / or community resilience

✖ Describe the project's primary expected outcomes?

How will you know if the project has achieved its aims and had an impact? If the project is successful what will have changed or have occurred that doesn't occur now? How will you measure and evaluate this? How do you plan to share the outcomes, knowledge and experiences of your project? How will the anticipated change achieved through this project be sustained beyond this grant funding?

Your Organisation - Please be as specific and measurable as possible; eg electricity costs will be reduced by 75%; programs will be more relevant and well attended resulting in improved financial performance; shared data collection between groups will result in improved responses to community needs.

Your Community - e.g. more accessible services and facilities, increased opportunities for participation, more affordable options for community activities, etc)

If yes to the above Disaster or Emergency Response Projects question, please answer question below.

Which of the following best describes the focus of your project:

<None>

### Disaster or Emergency Response

Does your project relate directly to preparedness for or recovery from natural disasters, emergency management, or drought?





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## Project Budget

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

### Income - FRRR Request & Your Contribution

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

\* Total project cost    \* Amount requested from FRRR ⓘ    \* Does the amount requested cover the full project cost?

☐

Cash contribution from your organisation

### Income - Cash contribution from other sources

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

#### Who and What

e.g. Name of organisation or fundraising activity. Other funding from local or state government

#### Amount

whole dollars only

#### Confirmed

Yes/No

☐☐☐☐☐☐**Total Cash contribution from other sources**

Click to calculate

0 ⓘ

### Expenditure

e.g. Provide a description of project expenses - "Kitchen materials (oven \$796; Sink \$279; Dishwasher \$603)" "Amount - 1680"

Quotes for items for over \$1,000 must be attached and uploaded in the Quotes area below.

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

#### Expenditure item

Description

#### Amount

Whole dollars only

Total Cash Expenditure

Click to calculate  
0

#### In-kind Contributions

Include an estimated value for non-cash contributions such as services, equipment, time and materials.  
For services provided by volunteers, please cost their services at \$41 per hour.

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

In-kind Support – Who	In-kind Support – What	Amount Whole dollars only
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Total In-kind Contributions

Click to calculate  
0

Additional information or comments regarding In-kind Contributions.

#### Budget Summary

##### Total Project Income

Total (FRRR request + Organisation cash contribution + Other cash contribution + In-kind contribution)

Click to calculate  
0

##### Total Project Expenditure

Total (Cash Expenditure + In-kind Contribution)

Click to calculate  
0

##### Balance - Total Income less Total Expenditure

**Please note:** Total expenditure must equal total income therefore balance should be zero.

Click to calculate  
0

#### Quotes

Upload and attach copies of quotes, where possible for items over \$1,000. Please note files can be no larger than 10MB.

Attach expenditure quotes here.

Browse for the document and upload here

Browse...

Upload

Additional expenditure quotes ⓘ

Browse for the document and upload here

 Browse...  

Additional expenditure quotes ⓘ

Browse for the document and upload here

 Browse...  

Additional expenditure quotes ⓘ

Browse for the document and upload here

 Browse...  

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Please attach the following documents for this application below

Organisations that are partnering with another group responsible for receiving and holding the grant funds must attach a letter of support for this project from their partnering organisation.

Letter of support:

Browse for the document and upload here. Please note files can be no larger than 10MB.

 Browse...  

### Financial Attachments

**Legal Organisation Financials** (the organisation associated with this application who have an ABN or Incorporation number)

Please read the following carefully:

- \* **For organisations who have audited financials:** Attach the most recent annual audited statements.
- \* **For organisations that do not have audited financials:** Attach most recent 12 months Income and Expenditure Statement. If you have a Balance Sheet, please also submit.
- \* **For organisations less than one year old:** Provide bank statements for the period you have been operating. ⓘ

Browse for the document and upload here. Please note files can be no larger than 10MB.

 Browse...  

Additional Financial Documents ⓘ

Upload

[Browse for the document and upload here.](#) Please note files can be no larger than 10MB.

Upload

Browse...

Support materials to support evidence/need for project This can include project plans, community surveys, media clips, letters of support, other local material to support need for your project. **(HIGHLY REGARDED)**

Please use the following attachment box to upload more support materials.

Please use the following attachment box to upload more support materials.

Please use the following attachment box to upload more support materials.

Photos <sup>3</sup>

Browse for the document and upload here. Please note files can be no larger than 10MB.

   

Additional Photos <sup>4</sup>

Browse for the document and upload here. Please note files can be no larger than 10MB.

   

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## Application Confirmation Statement

To be endorsed by the Legal Entity Organisation for this project.

I confirm that this application is made with the knowledge and approval of the legal head of the organisation, and endorse this application and agree to the following conditions:

- Acknowledge and understand that all applications become the property of FRRR and that FRRR may provide this application to other potential funding sources
- Agree to inform FRRR if the organisation has a significant change to its governance and/or financial situation
- Agree that if successful, to provide banking details to FRRR within the required time frame
- Agree that if successful, to expend funding within 12 months or as per the terms in the Grant Agreement
- Agree for FRRR to publish stories and photographs of the project funded.

\* I have read and agree to the above

☐

\* Name of authorised person completing this certification

\* Position

\* Date