

# Special Interest Program: Training/Program Attendance, (Bursary) (up to \$1,000)

Form Preview

## Event Description

\* indicates a required field

### Event/Activity Details

**Name of Activity \***

**Brief project description \***

Provide a short description (100 words recommended) of your project - what are you out to do?

**What category is your activity in? \***

- ☐ Arts and Culture
- ☐ Education
- ☐ Sport

**Start Date \***

Must be a date.

**End Date \***

Must be a date.

**Total Amount Requested (up to \$1,000) \***

Must be a dollar amount.

What is the total financial support you are requesting in this application?

## Applicant's Details

\* indicates a required field

### Applicant's Information

**Applicant's Name \***

Title      First Name      Last Name

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

**Please confirm that the applicant \***

- ☐ has met acquittal conditions for any previous Council funding
- ☐ has no overdue Council debt

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- ☐ is an Australian Citizen or Permanent Resident
- ☐ is providing sufficient evidence of volunteering their time in support of community events and activities
- ☐ is demonstrating that other avenues of financial support have been applied for (e.g. other grant funding, sponsorship, fund raising activities, etc.).

Person who is applying for grant (e.g., applicant themselves, parent, guardian, etc.)

### Applicant Contact Person \*

Title First Name Last Name

If Appl

### Applicant Contact Position Relationship \*

If applicant themselves is applying write NA

### Applicant Contact Mobile Phone Number \*

Must be an Australian phone number.

### Applicant Contact Email \*

Must be an email address.

## Program Finance

\* indicates a required field

### Total Program Cost \*

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

## Project Budget (Income)

Please outline your project income in the budget table below, including details of other income or funding that you have applied for, whether it has been confirmed or not.

Please make sure the numbers in this section align with your submitted financial statements.

Please list all amounts as exclusive of GST.

| Income description | Income type | Is this funding confirmed? | Income amount (budgeted) | Notes |
|--------------------|-------------|----------------------------|--------------------------|-------|
|--------------------|-------------|----------------------------|--------------------------|-------|

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|                                                                                                                                                                    |                                  |  |                                                                          |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--|--------------------------------------------------------------------------|-----------------------------------------------|
| Provide a clear description for each budget item. Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. | Please select the type of income |  | Enter the total amount expected to be received. Must be a dollar amount. | Add notes if you need to provide more context |
|                                                                                                                                                                    | Other:                           |  |                                                                          |                                               |
|                                                                                                                                                                    | Other:                           |  |                                                                          |                                               |
|                                                                                                                                                                    | Other:                           |  |                                                                          |                                               |

## Project Budget (Expenditure)

Please outline your project expenses in the expenditure table below - GST Exclusive

Please refer to Council's Community Grants Policy to ensure that the amount being requested from Council is covered by eligible expenditure.

Please note that for expenses over \$1,000 quotes will need to be provided.

### Expenditure description

### Expenditure amount (budgeted)

|                                                                                                                                                                             |                                                                                     |                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------|
| Provide clear descriptions for each budget item. Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'. | Enter the total amount to be expended on this budget item. Must be a dollar amount. | Add notes if you need to provide more context. |
|                                                                                                                                                                             |                                                                                     |                                                |
|                                                                                                                                                                             |                                                                                     |                                                |
|                                                                                                                                                                             |                                                                                     |                                                |

## Total Amounts

### Total Income Amount

This number/amount is calculated.

### Total Expenditure Amount

This number/amount is calculated.

## Funding Details

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**Please list all funding sources for your event (confirmed and unconfirmed) \***

Please write names separated by commas

**Will this program go ahead without Council's funding? \***

- ☐ Yes  
☐ No

## Program Outcomes

\* indicates a required field

**Describe how this event will benefit the applicant \***

Describe the specific issue or need you want to address (200 words recommended)

**What are the planned activities? \***

## Council Involvement/Recognition

**How will Cloncurry Shire Council be recognised for their contribution?**

- ☐ Council branded marquees  
☐ Council flag  
☐ Logo on apparel  
☐ Council banners  
☐ Logo on website  
☐ MC announcements  
☐ Radio/Television  
☐ Keynote speech (Mayor/Councillors)  
☐ Logo on advertising materials  
☐ Social media posts  
☐ Other:

## Supporting Material

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\* indicates a required field

Please attach the following (as per the Community Grants Policy)

## **Evidence that other avenues of financial support have been explored \***

Attach a file:

## **Evidence of volunteering time in support of community events and activities \***

Attach a file:

## **Evidence of any quotes listed as expenses in the budget**

Attach a file:

## **Bank Account Details \***

Attach a file:

## **Other relevant supporting material (e.g., Event Management Plan, Insurance Certificate, etc.)**

Attach a file:

## Declaration and Privacy Statement

\* indicates a required field

### **Declaration and Privacy statement**

I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the management of my organisation/group.

I have read the accompanying guidelines for applicants provided with this application form.

I agree that I will contact Cloncurry Shire Council immediately if any information provided in this application changes or is incorrect.

Cloncurry Shire Council respects all personal and confidential information received and will do everything possible to protect information from unauthorised access, loss or misuse. Information collected from you is required for the delivery of the services in accordance with the Trustees powers, functions and purposes. It may also be used by the Trustees/Directors and their representatives to conduct research and customer satisfaction surveys so that we may better understand community needs and can improve service delivery. Should you need to change or access your personal details, please contact Council [council@cloncurry.qld.gov.au](mailto:council@cloncurry.qld.gov.au) or (07) 4742 4100.

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I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge.

**I confirm that the an event, program, or activity is not**

- ☐ run solely for commercial profit
- ☐ one that contravenes Council's existing policies or do not align with Council's strategic direction
- ☐ one which is scheduled to occur prior to the funding round closing date or during the associated assessment and approval period
- ☐ one whereby Council funds will be donated to another cause (e.g. charity events)
- ☐ going to use the funds for wages or salaries of staff
- ☐ going to use the funds for the repayment of loans or debt
- ☐ going to use the funds for recurrent costs with day-to-day operations of a community group
- ☐ going to use the funds for retrospective funding
- ☐ going to use the funds for a part of or all of Council rates

**I am authorised to complete this application and have read and understood the declaration and privacy statement \***

☐ I agree

**Authorised Person's Name \***

**Relationship to Applicant \***

If applicant themselves applying write NA

**Date of Declaration \***

Must be a date.