

Kick-Starter Grants Application Form

Form Preview

Matching Grants Program

Program details

The Kick-Starter Grants Program supports individuals or unincorporated community groups to establish a social enterprise aimed at addressing priorities in Council's Community Strategic Plan or a project which promotes social inclusion and increased community participation. Applications can be made for funding of up to \$500 per financial year. repeated applications of the same project in subsequent years will not be accepted.

Project Outcomes must meet at least one of the below priorities:

- a) Improve connections and social networks within the community;
- b) Increase participation in community activities, including by those experiencing social disadvantage;
- c) Facilitate access to education, training, or employment opportunities;
- d) improve collaboration and coordination of community support services; and/or
- e) Improve social and physical well being through prevention and early intervention approaches.

Program Timeframe Applications can be made all year. Grants must be spent within 12 months of receiving them.

Eligibility

To be eligible for funding applicants must:

- a) Be an individual resident or unincorporated community group based within the Liverpool LGA
- b) Be 100% volunteer run or operate as a not-for-profit; and
- c) Work with Council's Community Development Worker (Funding and Support) during the project or initiative.

To understand program eligibility, exclusions and expected outcomes, please refer to the [Grants Donations & Sponsorship Policy](#).

Eligibility

* indicates a required field

Program Guidelines

- Before completing this application form, you should read through Council's Grants Donations and Sponsorship Policy, outlining the eligibility and guidelines of the Kick-Starter Grants Program: <https://www.liverpool.nsw.gov.au/community/grants-and-sponsorship>
- Incomplete applications and/or applications received after the closing date will not be considered.

Kick-Starter Grants Application Form

Form Preview

- This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is 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 regard to these eligibility criteria, please contact **grants@liverpool.nsw.gov.au**, or call **02 8711 7396 to speak to a Grants Officer**.

If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- you have read and understood the program guidelines outlined in the Grants Donations & Sponsorship Policy.
- you are able to demonstrate alignment between your project and the aims of this program
- your organisation is registered as:- Incorporated ABN ; or- Not-for-profit organisation; or- Your organisation is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- The program you are seeking funding for will provide direct outcomes for the residents of the Liverpool LGA.
- Your organisation is able to provide audited financial statements for the previous financial year.
- your organisation does not owe any reports or money to Liverpool City Council as a result of previous funding or grants
- Your organisation has no outstanding acquittal forms pending review.
- Your organisation has the appropriate type and level of insurance for the activities that are the subject of this grant
- Your organisation is not a school / high school, state department, or a political party.
- You have declared any direct association with the Mayor and Councillors to the Grants officer by contacting grants@liverpool.nsw.gov.au

You must confirm that all statements above are true and correct. *

☐ Yes

Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*.

In compliance with the Information Privacy Act 2009 (the Act) personal information on this form may be stored in Council's records database and may also be used for statistical research, information provision and evaluation of services. Your personal information may be provided to the financial institution which handles Council's financial transactions and may be disclosed to other agencies and third parties for purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal

Kick-Starter Grants Application Form

Form Preview

information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.

Do you agree to the Privacy Notice?

- ☐ Yes
☐ No

Contact Details

* indicates a required field

Applicant Details

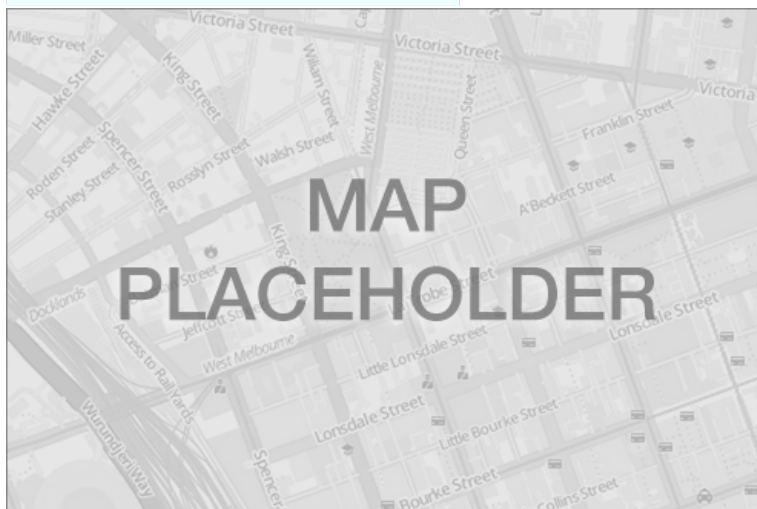
Organisation Name *

Organisation Name

Make sure you provide the same name that is listed in official documentation.

Organisation Primary Address

Address



Organisation Postal Address

Address

Organisation Phone Number *

Must be an Australian phone number.

Organisation E-mail Address *

Kick-Starter Grants Application Form

Form Preview

Must be an email address.

Organisation Website

Must be a URL.

Primary Contact Details

Primary contact *

Title First Name Last Name

This is the person we will correspond with about this grant.

Position held in organisation *

e.g., Manager, Director or Fundraising Coordinator.

Primary contact phone number *

Must be an Australian phone number.

Primary contact email address *

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

Organisation Details

* indicates a required field

Provide a brief description of your organisation's purpose or mission? *

Word count:

Must be no more than 300 words.

You can mention how long the org has been operating in Liverpool LGA, is it a volunteer-based org, what impact has the org made in Liverpool.

What type of Incorporated or not-for-profit organisation are you? *

- ☐ Educational institution (include school P&C, universities & higher education providers)
- ☐ Religious or faith-based institution
- ☐ Philanthropic organisation

Kick-Starter Grants Application Form

Form Preview

- ☐ Peak body
- ☐ Social enterprise
- ☐ International NGO
- ☐ Professional association
- ☐ Healthcare not-for-profit
- ☐ Community group
- ☐ Research body
- ☐ General not-for-profit (i.e. none of the sub-types listed above)

Please choose the option that best applies to your organisation.

Does your organisation have an ABN? *

- ☐ Yes ☐ No

Applicant 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)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

Project Details

* indicates a required field

Project title *

Word count:

Must be no more than 25 words.

Provide a name for your project/program/initiative. Your title should be short but descriptive

Anticipated start date *

Anticipated end date *

Kick-Starter Grants Application Form

Form Preview

New Section

Where will this program be delivered in the Liverpool LGA? please provide venue details *

Programs and events must be delivered in the Liverpool LGA, to be eligible for Council Grants.

Please provide an overview of what you will be doing in your project or event. *

Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes). Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Rationale: What is the need for this program in Liverpool and how will you address it? *

Tell us why your initiative is needed, and why you believe the activities you propose will produce the outcomes you seek. Provide statistics/evidence (where available) of both the need and the link between the work you will do and the outcomes you seek. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Alignment - How will your program align with at least one of Councils Community Strategic Objectives? *

COUNCIL STRATEGIC OBJECTIVE 1: HEALTHY, INCLUSIVE, ENGAGING -- STRATEGIC OBJECTIVE 2: LIVEABLE, SUSTAINABLE, RESILIENT -- STRATEGIC OBJECTIVE 3: EVOLVING, PROSPEROUS, INNOVATIVE -- STRATEGIC OBJECTIVE 4: VISIONARY, LEADING, RESPONSIBLE. Please refer to the Community Strategic Plan for more information about the four objectives and organisational goals - see <https://www.liverpool.nsw.gov.au/community/grants-and-sponsorship>. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Will your project or event utilise local volunteers? Provide details of how many and how they will be involved.

Are you working in partnership with any local organisations? Please list the organisation name/s and how are they supporting your program.

Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Kick-Starter Grants Application Form

Form Preview

Please upload letters of support (if available/relevant)

Attach a file:

A maximum of 5 files can be attached

Project Accessibility

Accessibility

Is your project or event free to participate in or access?

- ☐ Yes
☐ No

Council's Grants Donations & Sponsorship Policy does not support programs and events that charge participants a fee.

What is the expected number of participants or attendees?

Must be a number.

How will you measure participation or attendance?

Council supports projects or events which promote accessibility. How will you ensure your project or event is accessible to all Liverpool residents?

Ensure your project or event will engage with a large cross section of Liverpool's diverse community. Mention any accessibility measures you have considered to ensure program inclusivity

Working with Children

If your program or event involves working with Children, you must hold the necessary documentation and provide evidence of a Working with Children Check before a funding request can be approved.

Will your program or event involve working with children?

- ☐ Yes
☐ No

Please upload a current WWCC document registered in the name of the org/ program facilitator that will be present when children are engaged.

Attach a file:

Acknowledgement to Country

Kick-Starter Grants Application Form

Form Preview

Will your project or event include a 'Welcome to' or 'Acknowledgement of Country'?

- ☐ Yes
☐ No

Who will this be performed by?

Project Outcomes

*** indicates a required field**

Program Beneficiaries

Who are the expected primary beneficiaries of this project/program? *

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal - no particularly targeted beneficiaries'

Program Focus Areas

This program provides financial assistance to community groups and organisations for projects that foster partnerships and collaboration, build capacity, promote social inclusion, and increase community participation.

What is the primary area of focus you will address with your program *

You can select multiple areas of focus - all have equal value.

Project Outcomes

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/or intermediaries) of your project. Generally, outcomes can be framed as an **increase or decrease** in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Immediate outcomes occur directly following an activity (e.g. within 1 month); medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

Kick-Starter Grants Application Form

Form Preview

Your outcomes	Timeframe	Explanatory notes
What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row. You can refer to the Grants Donations & Sponsorship Policy for expected program outcomes. Please ensure you have at least 3 relevant program outcomes. https://www.liverpool.nsw.gov.au/community/grants-and-sponsorship	When do you expect this outcome to emerge?	Add notes if you need to provide more context.

Applicant Capacity

* indicates a required field

Now that we know about your project/program, we want to find out more about your organisation's ability to undertake the work you propose. Please provide some information about your capacity to complete the work you've described in this application. *

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, etc.) and how you will complete this project/program within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Please upload a copy of your most recent Annual Report or Audited Financial Statements *

Attach a file:

Please upload a copy of a valid Public Liability Certificate *

Attach a file:

Program Budget

* indicates a required field

Program Budget

Kick-Starter Grants Application Form

Form Preview

Please outline your project expenses in the expenditure table below, inclusive of GST.

- Income refers to any cash or in-kind contribution your program, by your organisation, or any partners contributing to the program. You can also include external grants or sponsorships that will support this program.
- Expenditure refers to the cost of delivering the program. This includes cost of materials, catering, venue hire (non-council site), facilitator fees, marketing & promotion etc, and must be supported with a copy of the quote or invoice attached to this application below. Please refer the Grants Donations & Sponsorship Policy to understand project expenses that will not be supported by Council: <https://www.liverpool.nsw.gov.au/community/grants-and-sponsorship>
- The funding amount you are requesting from Council, must be supported with matching quotes/ invoices. For instance, if you are requesting a \$10,000 grant, we need to check quotes and invoices to the value of \$10,000 have been attached to this application.

Total Funding Requested (\$)

Insert dollar amount you are seeking from Council through this Community Grant Application. Maximum funding available \$500. The requested amount must be supported with invoices and quotes to show Council where the funds will be allocated. Upload section is below on this page.

Total Project Cost (\$)

Insert the total cost as a dollar value for delivering this program, inclusive of all project expenses.

Budget

- List all the income you are investing into the project on the left-hand side of the budget table. Including the funding amount you have requested from Liverpool Council in this application
- List all the eligible project expenses on the right-hand side of the budget table.

Income	\$	Expenditure	\$

Budget Totals

Total Income Amount

Total Expenditure Amount

Income - Expenditure

Kick-Starter Grants Application Form

Form Preview

This number/amount is calculated.

This number/amount is calculated.

This number/amount is calculated.

Quotes / Invoices Upload

Please upload quotes and invoices that support the funding requested amount. You can attach multiple documents.

Attachment 1 *

Attach a file:

A minimum of 1 file and a maximum of 20 files may be attached.

Certification and Feedback

* indicates a required field

Certification

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 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 understand any affiliation to the Mayor and Councillors must disclosed to Liverpool Councils Grants Officer - grants@liverpool.nsw.gov.au

I agree *

☐ Yes

Name of authorised person *

Title First Name Last Name

Must be a senior staff member, trustee or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

Kick-Starter Grants Application Form

Form Preview

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. This is optional and does not impact your application.

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

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