2024/25 Emergency Relief Sustainability Grant Application Form
Form Preview

Before you begin

* indicates a required field

Please note

Before completing this application form, you should have read the 2024/25 Emergency Relief Sustainability Grant Guidelines on our website. You can also access a PDF version **here**.

It is recommended you discuss your application with a member of the Community Strengthening team before submitting your application or if you have any questions in regards to the eligibility criteria, on **9518 3568** or **9518 3531** monash.grants@monash.vic.gov.au.

Which Council officer have you spoken to about your application? *

This does not include Council officers from Monash Halls or other areas of Council or Councillors.

Monash Council is committed to supporting our local emergency relief organisations to provide support to members of the Monash community who find themselves needing assistance with food, material aid and financial relief. The agencies that deliver these services are seeing a higher need across the community due to the increased cost of living, rising grocery, housing and living expenses, with those who have not previously accessed these services being impacted.

The grants will open on Monday 1 July and close on Friday 26 July. This timeframe ensures applications will be open for 4 weeks.

A funding pool of $78,768.20 (excluding GST) is available and partnerships between organisations to apply for this funding are encouraged.

Eligibility

By ticking the following you are agreeing you are eligible to apply for a City of Monash Quick Response Grant: *

☐ I am applying on behalf of an organisation that has the primary purpose to provide emergency relief and support
☐ The organisation has no outstanding debts or documentation to Council
☐ This project is being conducted within the City of Monash
☐ No aspect of the project is being held in a venue with Electronic Gaming Machines (poker machines)*
☐ I have read the program guidelines

All 5 choices must be selected to proceed with the application. *Council is committed to promoting non-gambling social, cultural and recreational opportunities in Monash and, as such, does not provide funding for any activities that take place within a venue that has poker machines, this also includes one-off functions or events.

Primary Applicant Details

* indicates a required field

Primary Applicant Organisation Details

Applicant organisation name *

Organisation Name

Please use your organisation's full name, eg. Monash Cloud Appreciation Group. Check your spelling and make sure you provide the same name that has been used with MCGP previously

ABN

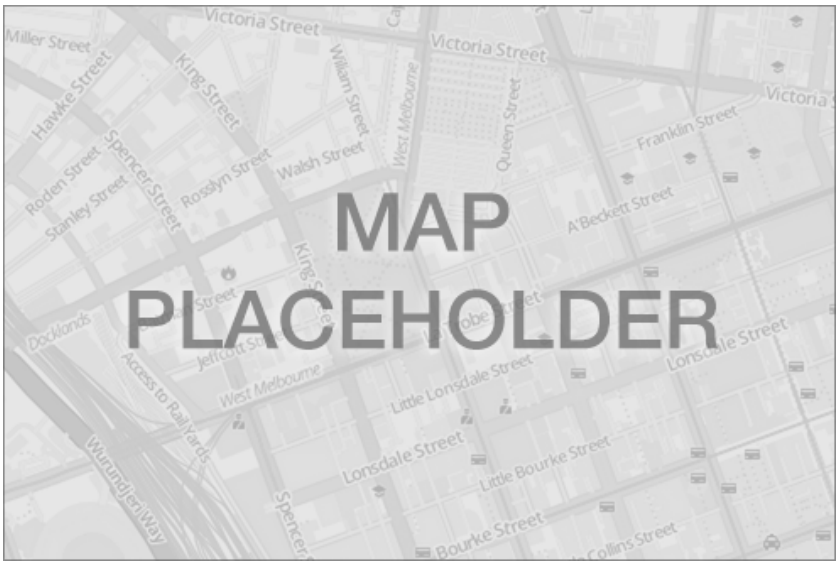
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

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	

Must be an ABN.

Organisation Primary Address *

Address



Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

Organisation Postal Address

Address

For PO Boxes please start typing in the field and then select 'Can't find my address' from drop down menu to input

Applicant website

Must be a URL

Primary contact person *

Title | First Name | Last Name

This is the person we will correspond with about this grant for the duration of the funding.

Position held in organisation *

e.g. President, Secretary, Committee Member

Primary 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. We recommend a generic address, eg. MonashClouds@outlook.com, so this can be passed on and accessed by future grant managers.

Is this project being undertaken in

○ Yes ○ No

partnership with another organisation(s)?

Partnerships between organisations to apply for this funding are encouraged.

Partner Applicant Details

* indicates a required field

Partner Organisation Details

Name of partnering organisation *

Organisation Name

ABN of partnering organisation

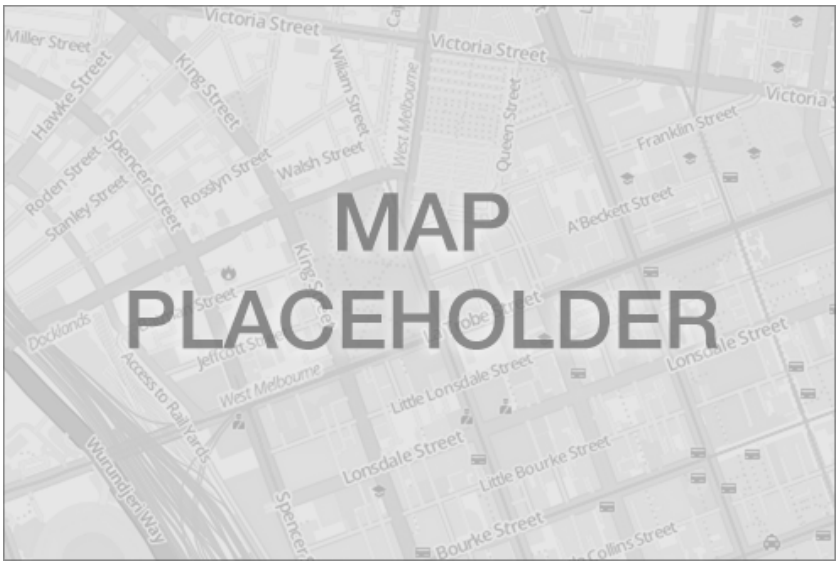
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

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.

Primary Address

Address



Postal Address

Address

Partnering organisation's website

Must be a URL

Primary contact person at partnering organisation *

Title | First Name | Last Name

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

Contact Person's position held in organisation

e.g. Manager, CEO

Contact person's primary phone number *

Contact person's email address *

Must be an email address

Please attach a letter from the partnering 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.

Project Details

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* indicates a required field

Project title: *

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

Project start date *

Must be a date and between 1/7/2024 and 30/6/2025.

Project end date *

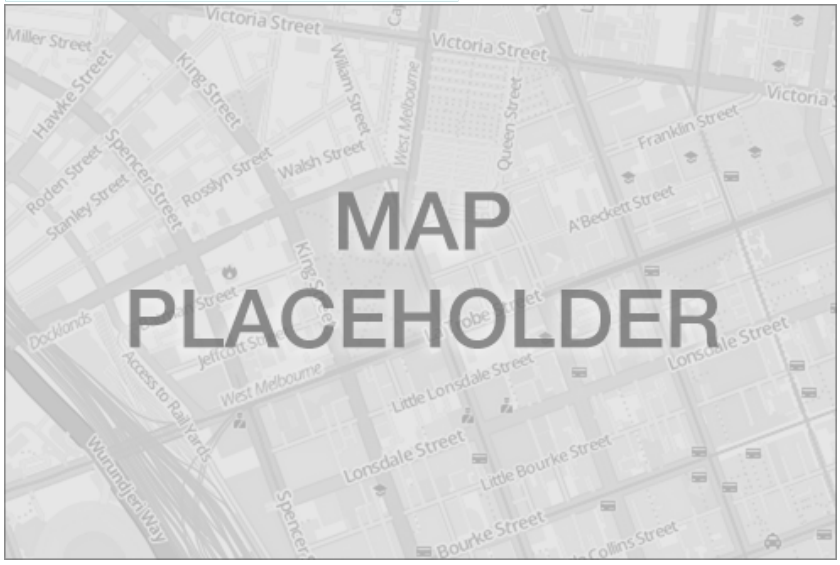
Must be a date and between 1/7/2024 and 30/6/2025.

Please provide a short summary of your project *

Word count:
Must be between 50 and 300 words.
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).

Project Location *

Address



Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

What are the primary areas of focus for this project/program? *

You may select up to five items. You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific.

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

Beneficiaries are the people the people your project will affect and benefit from. More than one item can be selected. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'

Will your project address gender inequality? *

○ Yes ○ No

Answer 'yes' if your project/program is specifically designed to improve opportunities for people of all genders (women, men and gender diverse people) or you think this may occur as a side-benefit to your initiative.

How will your initiative address gender inequality? *

Word count:
Must be between 30 and 300 words.
What will you do to address gender inequality and what changes do you expect will occur as a result?

Assessment Criteria

* indicates a required field

1. ADDRESSES AN EVIDENCE-BASED ORGANISATIONAL NEED OR OPPORTUNITY(25%)

How will this funding address a need within your organisation, and what benefits will be provided to the Monash community as a result? *

Word count:
Must be between 100 and 300 words.

What will the funding be used for? *

Word count:
Must be between 50 and 300 words.

Please upload any copies of letters of support and support materials

Attach a file:

Please attach any supporting materials to demonstrate community need and other support. This is not a requirement, but could strengthen your application. Support letters should be no more than 2 years old (the more current these supporting documents are the more relevant they are to your application).

Documentation from your partner organisations could strengthen your application.

2. EVIDENCE OF PARTNERSHIPS WITH (AN)OTHER ORGANISATION(S) (25%)

Please outline how you will partner with other organisations in Monash to deliver the project.

Word count:
Must be between 50 and 300 words.

3. CAPACITY TO UNDERTAKE THE PROJECT (25%)

Please outline your capacity to undertake and deliver the project. *

Word count:
Must be between 50 and 300 words.

4. FINANCIALS & BUDGET (25%)

Funding Requested *

$

Must be no more than $78,768.20

Overall Project Cost

$

This number/amount is calculated.
What is the total budgeted cost (dollars) of your project?

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

The first line of income has been completed based on the amount you have requested for funding above.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns.

Examples of income could include

- Organisational contribution
- Member contributions
- Any other grant you have/are applying for
- In-kind (non-cash) contribution made - this must be offset as an expense of the same value

Examples of expenses could include:

- Consultant fees
- Contract facilitator
- Training
- Website design and development

- Volunteer hours - this must be off-set by in-kind income of the same value

Please see *here* for an example of how the budget should look.

Use the 'Notes' column for any additional information you think we should be aware of, for example if you are paying for staff outline the hourly rate of pay and hours to be worked that you used to determine the amount (30

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

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

Income Description	Income Type	Confirmed Funding?	Income Amount ($)	Notes
Emergency Relief Sustainability Grant	Monash Grant Other Grants Member fees Earned Income Other Income	Confirmed Unconfirmed Not Applicable	$	Requested in this application
			$	
			$	
			$	

Cost Description	Funding Source	Amount ($)	Notes
		$	
		$	
		$	
		$	

Budget Totals

Total Project Income

$

This number/amount is calculated.

Total Project Cost

$

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

Please provide a copy of the financial statements for your organisation that have been compiled in the last 12 months. This must include:

- Balance Sheet
- Income (Profit/Loss) Statement

Please note: bank statements are NOT acceptable financial statements.

For more information visit the CAV website: Financial Statements & Auditing.

Please upload your organisation's financial statements *

Attach a file:

A maximum of 3 files may be attached.

Certification and Feedback

* indicates a required field

Certification

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 on Council's website.

I agree that I will contact the City of Monash immediately if any information provided in this application changes or is incorrect.

The Privacy and Data Protection Act 2014 protects the personal information of individuals. Monash Council takes this responsibility seriously and endeavours to manage and protect personal information in its possession at all times. Council has adopted policies and procedures to protect personal information.

These are available on Council's web site at www.monash.vic.gov.au/legal/privacy

Privacy Collection Statement

Monash City Council ("Council") collects personal information via this form to provide you with the service you are seeking and/or to fulfill its statutory responsibilities, and for related purposes which you may reasonably expect. Council will not release or provide your personal information to any other person or body, unless:(a) it has been authorised to do so by you, or(b) it is permitted or required to do so by law, or(c) it is appropriate or required in the performance of the functions of Council.

If you do not supply the requested information, we may not be able to provide you with the service and/or fulfill our statutory responsibilities. You may gain access to your personal information by contacting Council's Privacy Officer via telephone on 9518 3555 or email at mail@monash.vic.gov.au. Further details are available at the Privacy page on Council's website (www.monash.vic.gov.au).

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

○ Yes

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)

Date *

Must be a date

Applicant Feedback

Council is committed to the continuous improvement of our programs, therefore we would appreciate if you could please answer the below questions.

How did you hear about the Monash Community Grant Program?

- ☐ Council Social Media
- ☐ Council Staff
- ☐ Council Website
- ☐ Email from Council
- ☐ Multicultural Newspaper
- ☐ Street Advertising
- ☐ The Bulletin (City of Monash's monthly newsletter)
- ☐ Word of Mouth
- ☐ Other:

Please indicate how you found the online application process:

○ Very easy ○ Easy ○ Neutral ○ Difficult ○ Very difficult

How many hours in total did it take you to complete this application? *

Any other comments?