

Sports Development Program

Application Form

Applicant details						
Organisation contact details						
Organisation name:						
Primary location:						
Postal address:						
Contact person one						
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss or other:						
Full name:						
Position:						
Mobile number:				Email:		
Contact person two						
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss or other:						
Full name:						
Position:						
Mobile number:				Email:		
Organisation information						
Year of organisation foundation:						
Year of organisation incorporation:						
Incorporation number:						
Organisational membership levels (previous three years)	20__/20__ Total:		Junior:		Senior:	
	20__/20__ Total:		Junior:		Senior:	
	20__/20__ Total:		Junior:		Senior:	
Registered for ABN?	<input type="checkbox"/> Yes <input type="checkbox"/> No		ABN Number:			
Registered for GST?	<input type="checkbox"/> Yes <input type="checkbox"/> No		If registered for GST all figures in this application should exclude GST.			
If organisation does not have an ABN do you agree to sign a statement of supply form?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
If registered for GST do you agree to the issue of a Recipient Created Tax Invoice?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of account for electronic transfer:						
Bank:						
BSB:				Account number:		

Project support			
Have you discussed the project with your State Sporting Association?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Contact person:		Date of discussion:	
Email:		Phone number:	
Project funding			
Please select the grant you are applying for		<input type="checkbox"/> Small Grant (less than \$10,000) <input type="checkbox"/> Large Grant (\$10,001 - \$20,000)	
Total project cost: \$		Total grant requested: \$	
Start date:		Finish date:	
Have you, or do you intend to apply for grant funding from another organisation for this project?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please specify	Organisation name	Grant name	Amount \$
Project details			
Project title:			
Project overview: Describe your project in detail: <ul style="list-style-type: none"> • What will you be doing? • Why are you doing it? • When will you do it? • How will you do it? • Who will be involved? • Where will you do it? If you already have a separate project plan, you can attach it to your application.			
Senior (18 and over)		Junior (Under 18)	
Male		Female	
Percentage of participants who reside within the City of Joondalup			
How will the project deliver benefits to the community?			
Describe what your program hopes to change or improve, and why this is good for the community.			

How does this project assist your organisation's objectives?	
Describe how this project will help your club to achieve its goals. You should make reference to your club's strategic plan, and how this project will help your club to achieve one or more of the objectives listed in the plan.	
Who are the project's target group?	
Describe the primary people who will benefit from the project, and what difference it will make to them.	
Does the project involve infrastructure works to City assets?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes to the above, have you received approval for the works through a Club Funded Facility Upgrade application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project budget	
<ul style="list-style-type: none"> • Provide a detailed budget for the project using the Project Budget Template provided (available on the City's website). • Organisations registered for GST must only use ex-GST figures. The final grant will be grossed up to include GST. • Organisations not registered for GST should use GST inclusive costs for all figures below. • Provide copies of quotes for all proposed expenses. • List and clearly identify where each expenditure item will be allocated (ie against the City, Club or other?). 	
Application checklist (please ensure you supply each of the following to complete your application).	
<input type="checkbox"/> Discussed the application with a City of Joondalup Sport and Recreation Officer	
<input type="checkbox"/> Letter of support from state sporting association or industry body	
<input type="checkbox"/> Copy of certificate of incorporation	
<input type="checkbox"/> Copy of organisational structure	
<input type="checkbox"/> Copy of strategic plan	
<input type="checkbox"/> Copy of financial reports for previous two years (audited or presented to AGM)	
<input type="checkbox"/> Copy of all quotes	
<input type="checkbox"/> Copy of committee minutes endorsing the application	
<input type="checkbox"/> Project Budget	
<input type="checkbox"/> Project Outcomes	
<input type="checkbox"/> Any additional information	
Authorisation	
I (your name): _____	
Of the (your organisation): _____	
Certify that I am a member of the abovementioned organisation, and am authorised to submit this application on their behalf. The information contained within this application to the best of my knowledge is true and correct.	
Signed:	
Position:	
Date:	

Thank you for applying for funding with the City of Joondalup. You will be notified of the result of your funding application by:

- Small grants: September/October (Round 1) or March/April (Round 2)
- Large grants: November/December