

Playford Alive Initiatives Fund

Round 16 – 2023 Application Form

- Please read the Playford Alive Initiatives Fund Program <u>Guidelines booklet</u> before completing this application form.
- Either complete the application online or fill the form out clearly in black / blue pen.
- For more information on the Playford Alive Initiatives Fund, contact Martine Haynes on 8256 0188 or mhaynes@playford.sa.gov.au.
- Electronic copies of the Application Form and Guidelines are located at www.playfordalive.com.au.

TO APPLY PLEASE COMPLETE THIS APPLICATION FORM AND SEND TO:

Martine Haynes
Executive Officer – Playford Alive Initiatives Fund
Playford Operations Centre
12 Bishopstone Road
DAVOREN PARK SA 5113
or

mhaynes@playford.sa.gov.au

Closina	Date:	Wednesday	65	Sep	tember	2023
<u> </u>						

Organisation Name:		
Project Name:		



Section 1 - Project Information

1.	Project title:	
2.	Organisation name:	
3.	Contact details for the Organisation:	
Nar	me: 	Phone:
Ema	ail:	
Pos	sition in Organisation:	
Org	ganisation Name:	
Org	ganisation Address:	
Yes If yo orga gran	bu have answered <u>NO</u> to the question about anisation (Auspice) to act on your behalf to at. Please enter their details below. The ime:	
Ema		
	sition in Organisation: ganisation Name:	
Org	ganisation Address:	
4.	Applicant information: How long has to of the group?	the group been formed? What is the purpose
	Proposed start and finish date of the rt date:	project?



Date of Payment – please state the appropriate month of payment if successful (as some projects may wish to start straight away)				
Date of payment (Month):				
6. Project summary:				
Tell us what you are applying for? I.e. what is your organisation wanting to spend the grant on. What are the aims of the project / initiative and what outcomes will be achieved?				



Please tick all outcomes your initiative will deliver

Supports and strengthens community groups
Supports and encourages volunteering
Increases and enhances community participation
Support arts and cultural development
Promotes healthy lifestyles
Provides access to leisure, recreational and / or sporting opportunities
Supports learning opportunities that meet local community needs
Encourages partnerships to build a safe community
Promotes a positive image of the Playford Alive project and community
Supports the creation of local employment opportunities
Provides life management skills
Addresses issues of special needs groups
Delivers community infrastructure
Other:
Sustainability: please tell us how your organisation will maintain the project funds from the Playford Alive Initiatives Fund have been used.
Sustainability: please tell us how your organisation will maintain the project funds from the Playford Alive Initiatives Fund have been used.



Section 2 - Financial Information

Overall project cost, funding and time frame

You may complete the table below or attach your own project Budget. If attaching your own budget please list the total project cost, the amount of community grant sought, other funding sought, including in-kind contributions and project timeline.

Please include supporting quotes or documents verifying amounts you are applying for if you have these.

Note: One guiding principle is that any group applying must show the level of contribution that they are putting into the project. This principle of 'match funding' will be one of the criteria against which the application is judged.

INCOME	AMOUNT Excluding GST
The amount of money that your organisation is putting towards the project (if applicable)	\$
Additional funds either already received and / or applied for from other funding bodies (if applicable):	\$
Name of funding body:	
Status: Approved / Unknown:	-
** In-kind Contribution (if applicable)	\$
Amount you are requesting from the Playford Alive Initiatives Fund	\$
Total INCOME	\$
TOTAL PROJECT COST (excluding GST)	\$
Other funding contribution (if applicable)	\$
Is there a shortfall in the funds that you will need to raise?	\$
** Many projects rely on the generosity of volunteers or officers from relev	ant organisations to

To calculate volunteer / officer input into the project please use the following formula – add up the approximate number of hours put in by all volunteers / officer for the duration of the project x \$20 per hour.

If successful, would the Playford Alive Initiatives grant be sufficient to complete your project?			
Yes		No	

^{**} Many projects rely on the generosity of volunteers or officers from relevant organisations to help deliver a project, therefore could you please indicate the level of help given by volunteers / officers.



If the Playford Alive be able to proceed?	Initiatives grant could only partly fund your project, would it still
Yes	No
Section 3 - Cert	ification
(To be completed by person from the grou	the financially responsible person for the applicant group and one other p.)
I certify that the info	ormation in this application is true and accurate.
Print Name:	
Organisation:	
Signature	Date:
I certify that the info	ormation in this application is true and accurate.
Print Name:	
Organisation:	
Signature	Date:



Section 4 - Evaluation

The Playford Alive Initiatives Fund Board appreciates the time you have taken to complete this application. Please assist us in making sure we keep the application process as simple as possible by answering the following questions.

1.	How many hours did it take you to complete the application and gather your information?
2.	What improvements would you make to the Application Form and process?
3.	How did you find out about the Playford Alive Initiatives Fund program? Letter Facebook North is Up Website Word of Mouth Other
4.	How easy was it to obtain information about the Fund program?
	nk you for your cooperation in completing this evaluation. ase include this sheet with your application documents.