

Playford Alive Initiatives Fund

ROUND 11

Application Form

- Please read the Playford Alive Initiatives Fund Program Guidelines booklet 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 Ruth Naismith on 8256 0132 or rnaismith@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 ALL ATTACHMENTS AND POST TO:

Ruth Naismith
Executive Officer
Playford Alive Initiatives Fund
Playford Operations Centre
12 Bishopstone Road
Davoren Park SA 5113

or

Fax to 8256 0578

or

via email to rnaismith@playford.sa.gov.au

Closing Date: 17 August 2018

Organisation Name:

Project Name:

Section 1 - Project Information

1. Project title:

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2. Organisation name:

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3. Contact details for the Organisation:

Name: Phone:

Email: Fax:

Position in Organisation:

Organisation Name:

Organisation Address:

Is your organisation an Incorporated Body?

Yes No

If you have answered NO to the question above you will need to arrange for another organisation (Auspice) to act on your behalf to manage the financial arrangements of the grant. Please enter their details below.

Name: Phone:

Email: Fax:

Position in Organisation:

Organisation Name:

Organisation Address:

4. **Applicant information:** How long has the group been formed? What is the purpose of the group?

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5. **Proposed start and finish date of the project?**

Start date:

Finish date:

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:**

(a) List what you are applying for? ie what is your organisation wanting to spend the grant upon.

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(b) Describe the project in general and list the aims of the project (use an additional sheet if required).

Dotted lines for writing the project description and aims.

7. Problem / opportunity description: Explain what issue or opportunity your application is addressing in the community (use an additional sheet if required)

Dotted lines for writing the problem/opportunity description.



10. Project sustainability: please show how your organisation will maintain the project after funds from the Playford Alive Initiatives Fund have been used.

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Playford Alive is a partnership between:



Section 2 - Financial Information

Overall project cost, funding and time frame

- (a) 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	From	Amount Excluding GST
The amount of money that your organisation is putting towards the project (if applicable)		\$
Additional funds that you have applied for but are waiting for a decision ie from other potential funding bodies (refer Point B below)		\$
In-kind Contribution (refer Point C below)		\$
Amount you are requesting from the Playford Alive Initiatives Fund	Playford Alive Initiatives Fund	\$
Fund recognition – Some projects may be able to display the Playford Alive Logo on shirts / equipment, etc. Therefore please indicate the cost to do this	Playford Alive Initiatives Fund	\$
	Total Income	\$

TOTAL PROJECT COST (excluding GST) IS:	\$
Application to the Playford Alive Initiatives Fund (including fund recognition element if applicable)	\$
Other funding contribution	\$
Is there still a shortfall in the funds that you will need to raise?	\$

(b) What other funding have you applied for or received in relation to this project? If the outcome is not yet known, write “unknown”

Name of funding body	Amount sought (excluding GST)	Approved
	\$	\$
	\$	\$

(c) 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.

In-kind contribution	Amount (excluding GST)
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

If the Playford Alive Initiatives grant could only partly fund your project, would it still be able to proceed?

Yes No

If your application is successful would you be prepared to provide support / assistance to other organisations in preparing their application for similar projects in future rounds?

Yes No

Other Attachments – Project Description

When you submit this application, **it may be accompanied by additional information** which provides greater detail of the project such as including any other documents that you feel will support your application. This could include references, photos, newspaper clippings, examples of your work, etc.

Section 3 - Certification

(To be completed by the financially responsible person for the applicant group and one other person from the group.)

I certify that the information in this application is true and accurate.

Print Name: _____

Organisation: _____

Signature _____ Date: _____

I certify that the information in this application is true and accurate.

Print Name: _____

Organisation: _____

Signature _____ Date: _____