

2023-24 Clever & Creative Seed Grant - Application Form

Form Preview

Important Information

* indicates a required field

Application checklist

- You have read the [Clever & Creative Seed Grant Guidelines](#) available on the Geelong Australia website
- You have discussed this application with your committee or executive and been given permission to apply for this grant
- You understand the assessment criteria in the guidelines
- You have selected the correct form for the type of grant you wish to apply for
- This application form that you are about to complete is for a Clever & Creative Seed Grant.
- For information and access to other grant programs and application forms please go to the [Community Grants page on the Geelong Australia website](#) or contact a grants officer for clarification.

Completing this form

It is not mandatory to discuss your idea with an officer, however, if you would like to or you require further information, you can call the grants team on 5272 5560 or email communitygrants@geelongcity.vic.gov.au

If you discussed your idea with a grants officer, who did you speak to?

- ☐ Andrea Baranski (Arts & Culture)
- ☐ Ana Didulica (Grants)
- ☐ Simone Budd (Grants)

Select which City Officer you discussed your project with.

Eligibility to apply

The following questions ensure that you are eligible to apply for this grant. If you are uncertain please contact the Grants Team on 5272 5560.

Has the applicant met the acquittal conditions of any previous funding from the City? *

- ☐ Yes
- ☐ No (a funded activity is still in progress)
- ☐ Not applicable (no previous funding)

Does the applicant have an outstanding debt or arrears to the City of Greater Geelong? *

- ☐ Yes
- ☐ No

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If yes, please provide detail

Is the applicant involved in legal proceedings relating to winding up its operations, or experiencing insolvency or bankruptcy (this includes any legal bankruptcy-related actions against the organisation's directors or officers) *

- ☐ Yes
☐ No

Translation and Interpreting Service

Other Languages - Translation & Interpreting Service

[Free phone interpreting service](#)

If you need an interpreter, please call the Translating and Interpreting Service (TIS National) on **131 450** and ask them to telephone the City of Greater Geelong on 03 5272 5272. Our business hours are 8.30am-5.00pm.

National Relay Service (NRS)

If you are deaf or have a hearing or speech impairment and you wish to call a staff member, you can do so through the National Relay Service (NRS) and ask for 03 5272 5272 who can connect you with the grants team.

- TTY users can phone 13 36 77
- Speak & Listen (speech-to-speech) users can phone 1300 555 727
- SMS relay users can message 0423 677 767

Note: Area code must be included for each call.

For a full list of NRS call numbers, visit [National Relay Service call numbers](#).

Applicant & Contact Details

*** indicates a required field**

Applicant Details

Name of applicant (organisation/business/sole trader) *

Organisation Name

Primary (Physical) address *

Address

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Must be an Australian post code

Postal address (if different from above)

Address

Must be an Australian post code

Applicant website (if applicable)

Must be a URL

Applicant Contact Person

Note: This is the person that the City will contact, if required, in regards to this application.

Name *

Title First Name Last Name

Position held in organisation *

Preferred contact number *

Must be an Australian phone number.

Email address *

Must be an email address.

Alternate Contact Details

Alternate contact *

Title First Name Last Name

Position held in organisation *

Preferred contact number *

Must be an Australian phone number.

Email address *

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Must be an email address.

What is the legal status of your organisation? *

- ☐ Not-for-profit incorporated association
- ☐ Registered charitable organisation
- ☐ Unincorporated body (using an eligible auspice)
- ☐ Company limited by guarantee
- ☐ Commercial Entity or Business
- ☐ Sole trader/individual (entity type with Australian Business Register)

Examples of 'Other' could be Government School, Religious Institution, etc.

What is your incorporation number *

Incorporated Association or Australian Corporation Number. If you are not a legal entity, you must be sponsored (Auspiced) by an organisation who holds a relevant legal status (as per the grant guidelines)

Attach your certificate of incorporation or other evidence of your legal status *

Attach a file:

ABN details

Does your organisation have an ABN? *

- ☐ Yes
- ☐ No (we will submit a statement by supplier form)
- ☐ No (we are using an eligible auspice)

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	

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Tax Concessions
Main business location

If you do not have an ABN

Please submit a completed ATO Statement by a Supplier Form with your application, otherwise 46.5% of any approved grant may be withheld. Download the form from: [Statement by a supplier \(ato.gov.au\)](#)

Please upload completed Statement by a Supplier Form *

Attach a file:

Insurance

Public liability insurance *

- ☐ Certificate of currency is attached
- ☐ Will be provided by auspice organisation
- ☐ Will be obtained before start of any grant supported activities

Upload your PLI Certificate of Currency here:

Attach a file:

Insurance expiry date

Must be a date.

Do you Need an Auspice?

Auspice organisations are **ONLY** required if your group is not incorporated.

Definition and Role of an Auspice:

The auspice receives the grant money on your behalf and has responsibility for ensuring that the project is completed on time, the grant is acquitted, and the funds accounted for.

The auspice must be eligible to apply for our grants e.g. not-for-profit incorporated association or a registered charitable organisation.

Auspice organisations are required to read the funding agreement and conditions of the grant to ensure they fully understand their responsibilities in managing the funds on behalf of another organisation/group.

**Is your application being
auspiced?**

- ☐ Yes
- ☐ No

Payment Information

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If your application is successful, the City will pay your funds via EFT to your nominated bank account, after we have received your tax invoice.

If you are applying with the support of an auspice, the City will pay the grant funds to the auspice.

The City cannot make payment unless the name you provide for the following, is the same:

- Name of applicant (organisation)
- ABN (if applicable) – entity name
- Statement by a Supplier form (if you don't have an ABN)
- Name on tax invoice and
- Bank account name

We advise you to confirm with your treasurer or accountant that you have the correct information, and review any details you have entered into this application form.

Who is in your organisation?

Please respond to the following questions to help us improve our grants and better understand the needs of our local community.

This information will allow us to consider the overall impact of the Community Grants on people of different genders. This will help us ensure that the program is equitable and meets the needs of the Geelong community. Gender impact assessments are required under the Victorian Gender Equality Act 2020.

This data is not considered when assessing your application and will only be used in a de-identified form collated for each Community Grant program.

How many people are in your organisation/group? *

including, board/committee, general members/volunteers within the City of Greater Geelong municipality

How many are women and/or girls?

Must be a number.

How many are men and/or boys?

Must be a number.

How many are people who identify as gender non-binary?

Must be a number.

Gender non-binary refers to people who do not identify as a women/girl or man/boy, but may use a different term to describe themselves, such as trans, gender diverse or non-binary. Only include the number of gender non-binary people if you have collected information with their permission.

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

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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. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

Auspice

* indicates a required field

Auspice Details

Auspice Organisation Name *

Organisation Name

Auspice Primary Address *

Address

Must be an Australian post code

Auspice Postal Address (if different from above)

Address

Must be an Australian post code

Auspice Contact Person *

Title First Name Last Name

Auspice Contact Position *

Auspice Contact Primary Phone Number *

Must be an Australian phone number

Auspice Contact Primary Email *

Must be an email address

Auspice Incorporation Number *

Incorporated Association or Australian Corporation Number.

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Does the Auspice Organisation have an ABN?

- ☐ Yes
☐ No (please complete a statement by a supplier form below)

Auspice ABN

Auspice 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.

If Auspice organisation does not have an ABN

If the Auspice does not have an ABN, it will need to submit a completed ATO Statement by a Supplier Form with your application, otherwise 46.5% of any approved grant may be withheld. Download the form via this link : [Statement by a supplier \(ato.gov.au\)](#) then complete, scan and upload below.

Attach Statement by a Supplier Form here: *

Attach a file:

Auspice Certification

Please attach signed certification letter by office bearer of Auspice Organisation to demonstrate that it has agreed to act in that role on your behalf *

Attach a file:

Office Bearer could be: President, Secretary, Treasurer, Chief Executive etc. Letter must include the name, position, signature and date. Max 25mb

Auspice Insurance

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Public liability insurance *

- ☐ Certificate of currency is attached
- ☐ Will be obtained before the start of any grant funded activity

Upload PLI Certificate of Currency here:

Attach a file:

Auspice insurance expiry date

Must be a date.

Application Detail and Assessment

* indicates a required field

Title *

Brief project description (25 words or less) *

Must be no more than 25 words.

Provide a short description of your project. This will be used for reporting and promotional purposes.

Detailed project description (200 words or less) *

Word count:

Must be no more than 200 words.

Anticipated start date. Activities that commence prior to notification of outcomes are ineligible for funding. *

Must be a date.

Activities that commence prior to notification of outcomes are ineligible for funding.

Anticipated end date *

Must be a date.

Successful applicants are expected to spend funds within 12 months of notification of outcome. Please note that if successful, your acquittal will be due one month after the completion of your project.

ASSESSMENT CRITERIA

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To assist in answering the following questions, please refer to the assessment criteria in the [Clever & Creative Seed Grant Guidelines](#).

WELL PLANNED 50%

Please provide a detailed project proposal that outlines the proposed activity or project, including its scope, objectives, timeline and target audience. This information can be provided directly below or a project proposal can be attached

Optional - Attach your project proposal, if you have not provided it above

Attach a file:

Budget & Funding Request

It is mandatory to complete the budget income and expenditure tables as this section forms part of the 'Well Planned' assessment criteria outlined in the grant guidelines.

- Outline your project budget including the grant amount requested and what (if any) additional funding sources will assist to deliver your project.
- Requests can be for amounts of up to \$2,500.
- Please present your budget figures rounded to the nearest \$50.

Total amount requested

*

\$

What is the total grant amount you are requesting in this application?

Total project cost *

\$

What is the total budgeted cost of your project?

How to complete the budget income table

1. Income type (column 1)

- Please list all sources of funds for your project, including this grant request.
- 'Other Income Sources' refers to items such as e.g. participant/entry fees, donations etc.

2. Insert income amount (column 2)

- Place the amount corresponding with the income type in this column.

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- If your organisation/group is not contributing financially to the project place \$0 in the amount column.

3. Confirmed? (column 3)

- Select Y from the drop down menu if you know that the income is guaranteed
- Select N if the income is not confirmed eg: grant from another funding body, fundraising event

Please do not use commas when entering dollar amounts, e.g. write \$1000 not \$1,000

You can add as many rows as you need to the tables below, if required, by selecting the + sign at the end of row.

Budget - Income

1. Income type	2. Insert income amount \$	3. Confirmed?
Grant amount requested	\$	
Applicant cash contribution	\$	
Other grants/funding	\$	
Other income sources (provide details)	\$	
In-kind (value of labour, services or goods)	\$	
	\$	

Income Total

This automatically totals your income

Total Income Amount

\$

This number/amount is calculated.

How to complete the budget expenditure table

1. Expenditure item description (column 1)

- Provide clear description of expenditure items

2. Insert cost \$ (column 2)

- Provide the cost against all expenditure items you have entered

3. Use of City's Grant? (column 3)

- Select Y from the drop down box if you plan to use the grant funds to pay for this item
- Select N if you are using other funds to pay for this item

4. Upload quotes/estimates (column 4)

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- Quotes or an explanation of how you estimated the cost for the item can be uploaded for all expenditure items that you have marked with a 'Y' indicating the funds will go towards this item
- Quotes or price estimates sourced must be within the last six months

Please do not use commas when entering dollar amounts, e.g. write \$1000 not \$1,000

Budget - Expenditure

NOTE: It is mandatory to include quotes or price estimates on all expense items that you are applying for through this grant.

1. Expenditure item description	2. Insert cost (\$)	3. Use of CoGG Grant?	4. Upload quotes/ estimates here
	\$		
	\$		
	\$		
	\$		
e.g. see above			

Expenditure Total

This automatically totals your expenditure

Total Expenditure Amount

\$

This number/amount is calculated.

Budget Totals

The budget **MUST** balance (**TOTAL INCOME = TOTAL EXPENDITURE**)

This table automatically totals your income and expenditure. If column three does not equal \$0 you will need to review your budget to ensure that it balances.

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

Other Grants and Funding

If you have placed an amount in the budget income table above, against 'Other grants/ funding' please provide details of where any additional funding is from and the date those funds will be available if you are successful.

If there are no other sources of funding you have applied for, do not complete this section.

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Name of other grant/ funding programs applied to	Amount applied for	Date funds will be available if successful
	\$	
	\$	
	Must be a dollar amount.	Must be a date.

BENEFIT TO THE APPLICANT AND COMMUNITY 50%

What are the benefits of the project to the artist/group, including skill development, partnership or collaboration opportunities, and reaching new audiences? *

How does your project demonstrate creativity? (e.g. innovation or originality) *

What are the benefits to the creative and cultural sector in Greater Geelong, including increasing the diversity and accessibility of creative and cultural opportunities, public participation, economic benefits and improving networks in Geelong? *

Further Information

Optional - Is there anything else you would like to say about your application?

Stay Connected to Arts Geelong

We welcome you to stay connected to arts and culture news and opportunities across the City of Greater Geelong by [joining our mailing list](#) and following us on Instagram @artsandculturegeelong and [Facebook](#).

Certification and Privacy Information

* indicates a required field

Certification

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This MUST be completed by the applicant organisation.

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 Greater Geelong City Council approves the grant, I will be required to accept the terms and conditions of the grant as outlined in the grant guidelines and adhere the Funding Agreement.

I/We agree *

☐ Yes

☐ No

**Organisation/business/
sole trader name ***

Insert organisation name applying for this grant

**Auspice organisation
name (only complete if
applicable)**

If the application has an auspice - please provide organisation name

If you are being auspiced, you must arrange for auspice organisation to complete this section.

1. Name *

Title

First Name

Last Name

**Position (e.g. secretary
or treasurer) ***

Date *

Must be a date

Privacy Collection Statement

The personal information requested in this application form is being collected by City of Greater Geelong for the purpose of this grants program or any other directly related purpose. If the personal information is not collected, we may not be able to contact you for further questions or solutions. Your personal information will only be disclosed for the assessment of this application or as required to do so by law. Our [privacy policy](#) is available on our website. If you wish to alter any of the personal information you have supplied to City of Greater Geelong, please contact us by sending an email to privacy@geelongcity.vic.gov.au.

Feedback

* indicates a required field

You are now coming to the end of your application process and before you **REVIEW** and click the **SUBMIT** button please take a few moments to provide some feedback.

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We would value any feedback you may have regarding our online grants application process.

Please indicate how you found the online application process:

☐ Very easy ☐ Easy ☐ Neither ☐ Difficult ☐ Very difficult

How did you find out about the grants? *

- ☐ Social media
- ☐ Internet search
- ☐ City of Greater Geelong website - direct to page
- ☐ Email from City of Greater Geelong
- ☐ Word of mouth
- ☐ Arts Geelong Newsletter
- ☐ Arts & Culture Officer
- ☐ Other:

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

No more than 100 words.