

2026-27 Childrens Week - Application Form

Form Preview

Childrens Week Grants

* indicates a required field

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](#).

How to complete this form

1. Read the [grant guidelines](#) to understand the objectives of this grant
2. Ensure that all required supporting documentation is available to upload where needed. See the list below for specific items.
3. We recommend saving your progress every 10-15 minutes. If your computer is inactive for 20 minutes, your session will time out.
4. Questions often come with helpful tips or explanations, so make sure to read them.
5. Use the word count, where applicable, to help determine how much detail to include.
6. For information and access to other grant programs and application forms please go to the [Grants and Funding page on the Geelong Australia website](#) or contact a grants officer for clarification.

Supporting Documentation

Before you start your application, use this checklist as a guide - some items may not apply to your application:

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- Full and correct applicant name
- address and contact details of applicant
- Name and contact details of the person authorised to apply for this grant
- Certificate of incorporation
- Auspice agreement letter (if your organisation is not incorporated)
- Australian Business Number (ABN) details registered to the grant applicant name
- A completed Statement by Supplier form (if you don't have an ABN)
- Bank account details (account name, BSB and account number) which must match the applicant's name and ABN details
- Letters of support from project partners and/or stakeholders
- Copies of required permits or approvals
- Confirmation of venue booking
- A budget showing all income, expenses and how the grant funds will be used.
- Evidence of all expenses
- A letter explaining any staff wage costs. The letter must outline the role, the additional work required to deliver the project, and why this work cannot be delivered using existing resources.

Discussing your project

You must discuss your project/activity idea prior to completing this form with a City Officer, by phone 5272 5560 or email communitygrants@geelongcity.vic.gov.au

You can also contact Family Services at admin@geelongcity.vic.gov.au or phone 5272 4741.

Name of Grants Officer you have spoken to? *

- Nikki Welsh (Family Services)
- Ana Didulica (Grants)
- Simone Budd (Grants)
- Other:

Select which City Officer you discussed your project with.

Are you eligible to apply?

* indicates a required field

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.

When we say "you," we are referring to the organisation you are applying on behalf of—not you as an individual.

You meet the applicant eligibility requirements outlined in the 'Who is eligible to apply' section of the guidelines *

- Yes
- No
- Other:

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You meet the eligibility requirements outlined in the 'What you can apply for' section of the guidelines *

- Yes
 No
 Other:

You have met the acquittal conditions of any previous funding from the City? *

- Yes
 No
 Other:

Do you have an outstanding debt or arrears to the City of Greater Geelong? *

- Yes
 No
 Other:

If yes, please provide detail

Are you 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
 Other:

Applicant & Contact Details

* indicates a required field

Applicant Details

Name of applicant (organisation) *

Organisation Name

Primary (Physical) address *

Address

Must be an Australian post code

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Postal address (if different from above)

Address

If entering a PO Box, please enter manually by clicking on the words 'can't find your address?'

Applicant website (if applicable)

Must be a URL

Ward

Please select the electoral ward where your organisation is located (not the project/activity location). We collect this information to keep your local Councillor informed about community activity in their area.

If you are unsure, please click [here](#)

*

- Barrabool Hills
- Charlemont
- Cheetham
- Connewaree
- Corio
- Deakin
- Hamlyn Heights
- Kardinia
- Leopold
- Murradoc
- You Yangs
- Other:

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.

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Email address *

Must be an email address.

Alternate Contact Details

Alternate contact *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Position held in organisation *

Preferred contact number *

Must be an Australian phone number.

Email address *

Must be an email address.

Legal Status

What is the legal status of your organisation? *

- Incorporated not-for-profit organisation
- Registered charitable organisation
- Unincorporated body (using an eligible auspice)
- Company limited by guarantee
- Other:

Examples of 'Other' could be Early Learning service

Incorporation Number

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

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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	
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

If your application is successful, you must arrange public liability insurance (PLI) to cover the activity detailed in your application and submit your PLI certificate of currency with your funding agreement.

Applicants using an auspice will need to provide a PLI certificate from the auspice organisation.

I understand that if our application is successful, we must have public liability insurance to cover the approved activity. *

- Yes

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) as provided in this application
- ABN (if applicable, must be in the 'name of applicant' (organisation))
- [Statement by a Supplier](#) form (if you don't have an ABN)
- Bank account details (account name, BSB and account number) which must match the applicant's name (organisation) and ABN details (if you have an ABN)

We will also require a copy of the front page of your bank statement 'Redacted Bank Statement' that clearly shows the organisations account name, account number, and BSB, to confirm that these details are identical to the information provided on your tax invoice.

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.

Bank account details are requested for the purpose of prompt payment to successful grant recipients.

Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Redacted Bank Statement

Please upload a copy of the front page only of your bank statement that clearly shows organisation account name, account number, and BSB, as referenced above.

Important: You are not required to show your account transaction details or balance. You may hide this information before submission. Your data will be handled securely and confidentially as per our privacy policies.

Please [click here](#) to view a sample redacted bank statement.

Attach redacted bank statement *

Attach a file:

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.

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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

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 *

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Must be an email address

Auspice Incorporation Number *

Incorporated Association or Australian Corporation Number.

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:

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

Application Detail and Assessment

* indicates a required field

Please ensure that all details are correct as these will be used to promote your event.

Activity Title *

Brief project description (25 words or less) This will be used for reporting and promotional purposes. *

Must be no more than 25 words.

Anticipated start date. Activities must be held between 24 October - 1 November 2026 to be eligible for funding. *

Must be a date and between 24/10/2026 and 1/11/2026.

Anticipated end date. Activities must be held between 24 October - 1 November 2026 to be eligible for funding. *

Must be a date and between 24/10/2026 and 1/11/2026.

Where will your activity take place? Please ensure that all details are correct as these will be used to promote your event *

Address

If there are multiple locations, please list here:

Funding is offered for events and activities that cater to all children whose ages range between birth and twelve years and/or a relevant parenting activity for parents/carers who have children aged between birth and twelve years.

Does your event or activity: *

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- Cater to children whose ages range between birth and twelve?
- Cater to a relevant parenting activity for parents/carers who have children aged between birth and twelve years?
- Both of the above
- Other:

Date and Time (use as many rows as you need)

Activities must be held between 24 October - 1 November 2026 to be eligible for funding. Click the 'add more' button to add more rows.

Please ensure that all details are correct as these will be used to promote your event

Start and Finish Times (e.g. 9.00am-12.30pm)

Date/s of Event

	Must be a date.

Admission

Actives where admission fees are charged are ineligible to apply.

Is your event or activity free (no admission charge) *

- Yes
- No - you are ineligible to apply
- Other:

ASSESSMENT CRITERIA

COMMUNITY PRIORITIES 25%

Which United Nations Convention on the Rights of the Child (UNCRC) Article did you choose for your community? - [click here](#) to view the Articles.

*

Word count:

Must be no more than 200 words.

Why is this theme important to your community/group? *

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COMMUNITY IMPACT 35%

What are the benefits to families for holding this activity? e.g. connecting with new families, increasing membership, making new friendships *

Word count:

Must be no more than 250 words.

How will you make your activity inclusive and accessible? Think about how your activity can welcome everyone no matter their culture, abilities, gender or background. *

How will you make your activity environmentally friendly? (e.g. use of natural products, recycling, reusable items). *

How many people do you expect to be involved in your event *

Must be a number.

WELL PLANNED 40%

What activity are you planning to deliver? Please provide details of what will happen, who it is for, and how it will be delivered. *

Word count:

Must be no more than 250 words.

How will you promote your event to the public? For example, will you use social media, flyers, local newspapers, email, or news letters? *

Have you reviewed the City's checklist based on the Victorian Child Safe Standards to ensure all relevant child safety considerations will be addressed in the planning and delivery of your activity? A copy of the of the City's checklist can be viewed on page 15 of the grant guidelines. *

- Yes
- No

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Other:

[Click here](#) to view the City's checklist.

Permits and Approvals

It is your responsibility to secure any permits or approvals that your project or event may need.

I understand that it is the applicant's responsibility to secure any permits and/or approvals to deliver my project. *

Yes

Do you need a City of Greater Geelong event permit? *

Yes

No

If yes, what is the status of that application?

Approved

In process

Not commenced

Other:

Have you booked your venue, and is it suitable for your activity? (This is important before submitting your application.) *

Yes

No

Not applicable

If yes, please include venue booking confirmation (ie booking form, approval, email confirmation)

Attach a file:

For more information:

Please refer to our event planning information [guide](#).

If you are staging an event on public land, you need to apply to the City of Greater Geelong for permission. If so, please click [here](#)

Budget Funding Request

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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 activity.
- Requests can be made for amounts of up to \$1,000.
- Please present your budget figures rounded to the nearest \$50.

What is the total cost of your activity? *

\$

What is the total budgeted cost of your project?

How much grant money do you need? *

\$

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

How to complete the budget income table

1. Income type (column 1)

- Please list sources of funds for your project, including this grant request.

2. Insert income amount (column 2)

- Place the amount corresponding with the income type in this column.
- 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	\$ <input type="text"/>	<input type="text"/>
Applicant cash contribution	\$ <input type="text"/>	<input type="text"/>
Other grants/funding	\$ <input type="text"/>	<input type="text"/>
	\$ <input type="text"/>	<input type="text"/>

Income Total

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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 e.g. venue hire, catering

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)

- Evidence we will accept includes:
 - supplier or contractor quotes with the supplier's business name, ABN/ACN and contact details.
 - screenshots from online stores with the item description, price and supplier's business name.
- If you do not provide this evidence, you may receive a lower score for this criteria, or the cost may be removed from the grant request.

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

Budget - Expenditure

NOTE: If quotes or estimates are not submitted with your application your score for this criteria will be lower.

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

	\$		
e.g. see above	Must be a dollar amount.		

Expenditure Total

This automatically totals your expenditure

Total Expenditure Amount

\$

This number/amount is calculated.

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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.

Further Information

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

Optional - please attach any further documents to support your application

Attach a file:

Prioritising Applications

* indicates a required field

If the total funding requested by all applicants exceeds the available funding, we may prioritise:

- applications for events and activities that anyone can attend (not just members or invited guests)
- applicants who did not receive money from this grant in the previous year
- applications from organisations that do not receive money from electronic gaming machines or gambling.

Is your event or activity open to the general public? *

- Yes
 No
 Other:

Did you receive a Childrens Week grant from the City in the previous financial year? *

- Yes
 No

If yes, please provide details

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Electronic Gaming Machines (EGMs)

Do you own or operate EGMs? *

- Yes
 No

Do you receive EGM generated funding or support? *

- Yes
 No

If you answered yes to either question above, please provide details

Certification and Privacy Information

* indicates a required field

Certification

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 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

Certification must be agreed to by two representatives of the applicant organisation

If you are being auspiced, then one representative must be from the auspice organisation.

1. Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position (e.g. secretary or treasurer) *

2. Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

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Position (e.g. secretary or treasurer) *

Date *

Must be a date

Privacy Collection Statement

We collect the personal information on this form so we can process your application and follow up if needed. We won't share it except to assess your grant or if the law requires it. Our full [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

Help us improve

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.

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

Were the questions in this form easy to understand?

- Very easy Easy Neither Difficult Very difficult

Suggestions - What can we do better next time?

No more than 100 words.

How did you find out about the grants? *

- Social media
 Internet search
 Newspaper
 Word of mouth
 Previous applicant
 City of Greater Geelong website - direct to page
 Email from City of Greater Geelong
 Other:

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