



AGENDA

FOR SPORT, RECREATION AND GRANTS COMMITTEE MEETING TO BE HELD ON

8 AUGUST 2016 AT 6:30 PM

IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY

MEMBERS

Cr D Proleta (Chairman)
Mayor G Aldridge (ex officio)
Cr D Balaza
Cr D Bryant (Deputy Chairman)
Cr L Caruso
Cr D Pilkington
Cr B Vermeer
Cr J Woodman
Cr R Zahra

REQUIRED STAFF

Chief Executive Officer, Mr J Harry
General Manager Business Excellence, Mr C Mansueto
General Manager Community Development, Ms J Trotter
Manager Governance, Ms T Norman

APOLOGIES

LEAVE OF ABSENCE

PRESENTATION OF MINUTES

Presentation of the Minutes of the Sport, Recreation and Grants Committee Meeting held on 11 July 2016.

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Administration

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OTHER BUSINESS

CLOSE



**MINUTES OF SPORT, RECREATION AND GRANTS COMMITTEE MEETING HELD
IN COMMITTEE ROOM 1, 12 JAMES STREET, SALISBURY ON**

11 JULY 2016

MEMBERS PRESENT

Cr D Proleta (Chairman)
Cr D Balaza
Cr D Bryant (Deputy Chairman)
Cr L Caruso
Cr D Pilkington
Cr B Vermeer
Cr R Zahra

STAFF

Chief Executive Officer, Mr J Harry
General Manager Business Excellence, Mr C Mansueto
General Manager Community Development, Ms J Trotter
Manager Governance, Ms T Norman

The meeting commenced at 6.30pm.

The Chairman welcomed the members, staff and the gallery to the meeting.

APOLOGIES

Apologies were received from Mayor G Aldridge and Cr J Woodman.

LEAVE OF ABSENCE

Nil

PRESENTATION OF MINUTES

Moved Cr D Pilkington
Seconded Cr D Bryant

The Minutes of the Sport, Recreation and Grants Committee Meeting held on 14 June 2016, be taken and read as confirmed.

CARRIED

REPORTS

Administration

7.0.1 Future Reports for the Sport, Recreation and Grants Committee

Moved Cr D Pilkington
Seconded Cr L Caruso

1. The information be received.

CARRIED

Sport and Recreation

7.1.1 Minor Capital Works Grants - July 2016 Allocations

Moved Cr D Pilkington
Seconded Cr R Zahra

1. That using its delegated powers outlined in the adopted Terms of Reference the Sports, Recreation and Grants Committee assess and allocate funding for the July 2016 round of Minor Capital Works Grants Program as follows:
 - a. Para Hills Cricket Club - \$17,000 for concreting of shed/verandah and upgrade of batting nets;
 - b. Salisbury Cycle Speedway - \$25,000 for track lighting; and
 - c. Ingle Farm Junior Soccer Club - \$23,000 for a storage shed.

CARRIED

Community Grants

7.2.1 Youth Sponsorship - June Applications

Moved Cr D Pilkington
Seconded Cr L Caruso

1. The information be received.

CARRIED

7.2.2 Review of Youth Sponsorship Funding and Allocation Cap

Moved Cr R Zahra

Seconded Cr D Pilkington

1. The information be received.
2. That individual Youth Sponsorship payment levels be increased by 20% for the 2016/17 financial year.
3. That consideration be given to an increase of 30% to the individual Youth Sponsorship payment levels for the 2017/18 financial year.
4. That no funding cap be applied to multiple applications for Youth Sponsorship from the same organisation for the same event.
5. A review of the payment levels and funding cap applicable under the Youth Sponsorship Funding program be undertaken every two years.

LOST

*Cr D Balaza sought leave of the meeting to speak for a second time.
Leave was granted.*

Moved Cr B Vermeer

Seconded Cr D Bryant

1. The information be received.
2. That individual Youth Sponsorship payment levels be increased by 20% for the 2016/17 financial year.
3. A funding cap of 10 times the individual Youth Sponsorship funding amount be endorsed for more than 10 applications from the same organisation for the same event.
4. A review of the payment levels and funding cap applicable under the Youth Sponsorship Funding program be undertaken as part of the 2017/18 budget process and then every two years.

CARRIED

7.2.3 Community Grants Program Applications for July 2016

Moved Cr B Vermeer

Seconded Cr D Balaza

1. The information be received and noted.

CARRIED

7.2.4 17/2016: Second Chances SA Inc. - Community Grants Program Application

Moved Cr D Pilkington
Seconded Cr B Vermeer

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the July 2016 round of Community Grants as follows:
 - a. Grant No. 17/2016: Second Chances SA Inc. be awarded the amount of **\$2,000.00** to assist with the purchase of school related uniforms and footwear for the Rescuing PK's living in the City of Salisbury project as outlined in the Community Grant Application.

CARRIED

7.2.5 18/2016: Adelaide Northern Districts Family History Group Inc.

Moved Cr D Pilkington
Seconded Cr R Zahra

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the July 2016 round of Community Grants as follows:
 - a. Grant No. 18/2016: Adelaide Northern Districts History Group Inc. be awarded the amount of **\$1,071.00** to assist with the purchase of a digital projector and colour laser printer for ongoing use as outlined in the Community Grant Application.

CARRIED

7.2.6 21/2016: Para Hills Amateur Boxing Club Inc. - Community Grants Program Application

Moved Cr D Pilkington
Seconded Cr B Vermeer

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the July 2016 round of Community Grants as follows:
 - a. Grant No. 21/2016: Para Hills Amateur Boxing Club Inc. be awarded the amount of **\$2,000.00** to assist with the trophies, ring and venue hire for the Gloves to Glory event as outlined in the Community Grant Application.

CARRIED

7.2.7 Increase to Maximum Community Grant Amount

Moved Cr D Pilkington
Seconded Cr L Caruso

1. The information be received.
2. The maximum Community Grants amount of \$2000 remain unchanged.
3. The Community Grants Program Guidelines be modified to allow the Sports, Recreation and Grants Committee to allocate up to an additional \$500 per application at its discretion.

Cr R Zahra moved an AMENDMENT that

1. The information be received.
2. The maximum Community Grants amount of \$2000 remain unchanged.
3. The Community Grants Program Guidelines be modified to allow the Sports, Recreation and Grants Committee to allocate up to an additional \$1000 per application at its discretion.

Seconded Cr D Balaza

The AMENDMENT on being put was **LOST**

The MOTION, was PUT and **LOST**

Moved Cr B Vermeer
Seconded Cr D Balaza

1. The information be received.
2. The maximum Community Grants amount be increased to \$2500.
3. A review of the maximum Community Grant level be undertaken as part of the 2017/18 budget process and then every two years

CARRIED

OTHER BUSINESS

Nil

The meeting closed at 7.29pm.

CHAIRMAN.....

DATE.....

ITEM	7.0.1
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	Future Reports for the Sport, Recreation and Grants Committee
AUTHOR	Michelle Woods, Projects Officer Governance, CEO and Governance
CITY PLAN LINKS	4.3 Have robust processes that support consistent service delivery and informed decision making.
SUMMARY	This item details reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution. If reports have been deferred to a subsequent month, this will be indicated, along with a reason for the deferral.

RECOMMENDATION

1. The information be received.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 Historically, a list of resolutions requiring a future report to Council has been presented to each committee for noting.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 Report authors and General Managers.
- 2.2 External
 - 2.2.1 Nil.

3. REPORT

- 3.1 The following table outlines reports to be presented to the Sport, Recreation and Grants Committee as a result of a previous Council resolution:

Meeting Item	- Heading and Resolution	Officer
22/02/2016 7.1.1	Sports Development Framework Evaluation 3. Subject to consideration of a further report to Council by December 2016, the Sports Development Program be expanded, based on identification of sporting programs that will deliver greatest return to Council for any investment made. Due: December 2016	Paul Zimny
25/07/2016 7.2.2 (further motion)	Funding Caps for Youth Sponsorship Applications 1. The criteria for funding applied to individual youth sponsorship applications from the same organisation for the same event be reviewed. Due: March 2017	Mechelle Potter

4. CONCLUSION / PROPOSAL

- 4.1 Future reports for the Sport, Recreation and Grants Committee have been reviewed and are presented to Council for noting.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016

ITEM	7.2.1
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	Youth Sponsorship - July 2016 Applications
AUTHOR	Mechelle Potter, Administrative Coordinator - Business Excellence, Business Excellence
CITY PLAN LINKS	3.3 Be a connected city where all people have opportunities to participate.

RECOMMENDATION

1. The information be received.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 The Sports, Recreation and Grants Committee resolved that a report be provided listing all Youth Sponsorship grants approved.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 Elected Members
- 2.2 External
 - 2.2.1 Youth Sponsorship applicants

3. REPORT

- 3.1 The following Youth Sponsorship Applications were assessed and approved by the Chairperson and one other member of the Sport, Recreation and Grants Committee in July 2016.
- 3.2 All applications except for applications listed at section 3.3 met the criteria for the Youth Sponsorship Program and the funding allocation was provided as per the appropriate funding level.
- 3.3 The successful July applications have been funded using the old schedule as they were received and considered prior to the Council decision at its 25 July meeting to increase payments by 20%. Future applications will be paid at the new rates.

Funding per application	Event	Total Funding
24 @ \$200	Twenty six applications have been received to represent South Australia at the 2016 Interstate Bhutanese Community Soccer Tournament to be held in Launceston, Tasmania in July 2016.	\$4,800.00
1 @ \$800	One application has been received to represent Australia in the 2016 World Youth Tenpin Bowling Championships to be held in Lincoln, Nebraska in July 2016.	\$800.00
1 @ \$800	One application has been received to represent Australia in the 2016 Cal Ripken World Baseball Series to be held in Aberdeen, Maryland in July 2016.	\$800.00
1 @ \$200	One application has been received from to represent South Australia in the School Sport Australia 12 and Under Cross Country Championship to be held in Canberra, ACT in August 2016.	\$200.00
1 @ \$800	One application has been received to represent Australia in the Hanmadang Taekwondo Championships to be held in Seoul, Korea in August 2016.	\$800.00
1 @ \$200	One application has been received to represent South Australia in the School Sport Australia 12 and Under Swimming Championship to be held in Darwin, Northern Territory in September 2016.	\$200.00
1 @ \$400	One application has been received to represent Australia in the Trans Tasman Cricket Series to be held in Port Macquarie, New South Wales in September 2016 (Competition with New Zealand).	\$400.00
1 @ \$800	One application has been received to represent Australia in the 2016 Under 15 Baseball World Cup to be held in Iwaki, Japan in July 2016.	\$800.00
1 @ \$800	One application has been received to represent South Australia in the 2016 New Zealand National Boccia Championship to be held in Auckland, New Zealand in November 2016.	\$800.00
7 @ \$200	Seven applications have been received to represent South Australia at the Australian Irish Dancing Championships to be held in Hobart, Tasmania in September 2016.	\$1,400.00

12 @ \$200	Twelve applications have been received to represent South Australia at the School Aerobics National Championships to be held in Broadbeach, Queensland in August 2016.	\$2,400.00
1 @ \$200	One application has been received from to represent South Australia at the 2016 Australian Junior Volleyball Championships to be held in Queensland in September 2016.	\$200.00

Total Funding for July 2016: \$13,600.00

3.4 The following applications were received however were deemed ineligible and listed below:

- 3.4.1 There were a further 16 applications received to represent South Australia at the 2016 Interstate Bhutanese Community Soccer Tournament to be held in Launceston, Tasmania on 3rd July 2016 however the supporting documentation from the Association was not provided and in two instances the applicants were older than 25, therefore these applications were considered ineligible.
- 3.4.2 An application was received to represent South Australia at the Australian Calisthenics Federation National Competition to be held in Adelaide on 6th July however the application was received after the event and therefore this application was considered ineligible.
- 3.4.3 An application was received to represent South Australia at the Australian Junior Indoor Cricket Championships to be held in Dubbo, New South Wales on 2nd July 2016 however the application was received after the event and therefore this application was considered ineligible.

4. CONCLUSION / PROPOSAL

- 4.1 The 2016/17 Youth Sponsorship budget allocation is \$42,000 less expenditure to date of \$13,600 (including funding for July 2016) which leaves a balance remaining of \$28,400.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016

ITEM	7.2.2
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	Community Grants Program Applications for August 2016
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	This report outlines the Community Grants Program Applications received for the August 2016 round. Each Application is submitted for review by the Sport, Recreation and Grants Committee in an individual report.

RECOMMENDATION

1. The information be received and noted.

ATTACHMENTS

There are no attachments to this report.

1. BACKGROUND

- 1.1 Three (3) applications were received for the August 2016 round of Community Grants.
- 1.2 Three (3) applications received for the March and April 2016 round of Community Grants respectively required further information. The further information has not been received and the applications are therefore deemed ineligible as per clause 11.2 of the *Guidelines and Eligibility Criteria*.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 One (1) application received for the March 2016 round of Community Grants Program funding required further information. The further information has not been received and the application is therefore deemed ineligible as per clause 11.2 of the *Guidelines and Eligibility Criteria*, and listed below:
- 3.1.1 10/2016: The Lao Association of South Australia Inc.
- 3.2 Two (2) applications received for the April 2016 round of Community Grants Program funding required further information. The further information has not been received and the applications are therefore deemed ineligible as per clause 11.2 of the *Guidelines and Eligibility Criteria*, and listed below:
- 3.2.1 13/2016: SecondBite
- 3.2.2 14/2016: Interchange Inc.
- 3.3 Three (3) applications are presented for the August 2016 round of Community Grants, all of which are deemed compliant and listed below:
- 3.3.1 22/2016: Salisbury East Little Athletics Centre Inc.
- 3.3.2 23/2016: Providence Chick [World Harvest Christian Centre Inc.]
- 3.3.3 24/2016: Orana Inc.
- 3.4 The Community Grant Funding budget allocation for 2016/2017 is \$82,000. In 2016/2017 monies approved for grant funding is \$5,071.00 which leaves an unspent balance of \$76,929.00.
- 3.5 The monies committed to the three (3) compliant applications for the August 2016 round, if all approved, is **\$6,815.00**.
- 3.6 The remaining balance of the grant funding if all three (3) applications are approved is **\$70,114.00**.

4. CONCLUSION / PROPOSAL

- 4.1 Three (3) Community Grants Program applications are presented for funding consideration at the Sport, Recreation and Grants Committee in August 2016.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016

ITEM	7.2.3
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	10:2016: The Lao Association of South Australia Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Lao Association of South Australia Inc. Application is submitted to the Sport, Recreation and Grants Committee for information.

RECOMMENDATION

1. The information be received and noted.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 10:2016 - The Lao Association of South Australia Inc. - Application

1. BACKGROUND

- 1.1 The Lao Association of South Australia Inc. Application was received for the March 2016 round of Community Grants Program funding.
- 1.2 The Application was incomplete and required further information.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT


- 3.1 The Lao Association of South Australia Inc. Application is incomplete and the following further information was requested:
- 3.1.1 Evidence by way of meeting minutes that the Committee has endorsed submission of the Community Grants Program application;
 - 3.1.2 Details for a referee;
 - 3.1.3 Firm date for the event;
 - 3.1.4 A detailed, current quote;
 - 3.1.5 Signatory 1 must tick and initial the acknowledgement boxes for the Application Declaration.
- 3.2 The additional information has not been received and therefore the Application is deemed ineligible as per clause 11.2 of the Community Grants Program Guidelines and Eligibility Criteria:
- Applications that are incomplete or do not contain all essential documentation may be considered ineligible or result in deferral to a subsequent round to enable an assessment to be made pending receipt of the incomplete/additional information. Applicants are requested to submit additional information within the timeframe for submission to the next round. Should the additional information not be received within three (3) months of receipt of the original application the application will be deemed ineligible and the organisation or group must submit a new application should it wish to proceed with applying for Community Grant funding.*
- 3.3 The Applicant has been notified that their Community Grants Program Application has lapsed.

4. CONCLUSION / PROPOSAL

- 4.1 The Lao Association of South Australia Inc. Application is submitted for information as per clause 11.6 of the Community Grants Program Guidelines and Eligibility Criteria:
- Applications received that are identified ineligible against the funding guidelines are submitted to the Sport, Recreation and Grants Committee for information. A copy of the application and any other relevant document(s) is presented to the Sport, Recreation and Grants Committee in its entirety as an attachment to the Committee Report as outlined in paragraph 11.4.*

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016




11 FEB 2016

Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



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The Living City

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Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public & Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this project is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 1 of 12

Applicant Organisation Information			
1. GROUP / ORGANISATION DETAILS			
Name:	The Lao Assoc of SA Australia Inc		
Address:	[REDACTED]		
Suburb:	Kudla Postcode: 5115		
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)			
Name:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Vicky Hwang		
Title (your role with the group/organisation):	Public Officer		
Address:	[REDACTED]		
Phone:	Landline: [REDACTED] Mobile: [REDACTED]		
Email:	[REDACTED]		
3. COMMUNITY GRANT RESPONSIBILITY			
Name of Person Responsible for the Grant:	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> MR Seuksavanh Vorakoumane		
Title (role with the group/organisation):	President		
4. GROUP / ORGANISATION MANAGEMENT DETAILS			
How is your group/organisation managed:	President, Treasurer, Secretary, Women's rep, Elderly rep, youth rep & Ethnic School rep.		
Is your organisation:			
a) Incorporated:	<table border="1"> <tr> <td>Yes <input checked="" type="checkbox"/> (go to question c)</td> <td>No <input type="checkbox"/> (go to question b)</td> </tr> </table>	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)		
ASIC Registration Number:			
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	<table border="1"> <tr> <td>Yes <input type="checkbox"/> (go to question c)</td> <td>No <input checked="" type="checkbox"/> (go to question c)</td> </tr> </table>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)		
Parent Organisation			
Name:			
ASIC Registration Number:	7713 ABN 1114990195		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 12

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	grants & fund raising	
f) Purpose:	Serve Lao community	
g) Other (please specify):	Yes <input checked="" type="checkbox"/> community member x no members all welcome to attend.	No <input type="checkbox"/>
5. BANKING INFORMATION		
Your organisation must have its own Bank/Credit Union Account or similar		
Full Account Name: The Lao Assoc of SA Inc *do not provide account or BSB numbers*	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)		
Referee's Name:		
Referee's Contact Information:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 12

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <small>(If Yes - Please Quote ABN:)</small> 41149900515 <small>(If No, the ABN Declaration Form attached must be signed)</small>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 4 of 12

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes, provide details:		
INCOME	\$ 1,500	
Project or event generated income:	\$ 1,500	
Organisation's contribution:	\$ 2,000	
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	\$ NIL	
Income received from sponsors: (list sponsor(s) and their contribution)	\$ NIL	
Donations: (please specify the source, product or service and estimated amount of funding requested)	\$ NIL	
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	\$ NO	
TOTAL (including GST):	\$ 3,535 (+GST)	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	Members will donate cooked food to offer to sell at/on the night. Volunteers duties can entail selling food, set and clean up hall, serve drinks	
EXPENSES (specify the proposed expense budget by item:)	\$ 1,500 Hall Hire	
	\$ 200 Decorations	
	\$ 1,200 Postage	
	\$ 400 Drinks	
	\$ 1,500 Band	
	\$ 300 Security	
	\$	
	\$	
	\$	
TOTAL (including GST):	\$ 4,100 (+ \$4,141 GST)	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 12

Summary of Project/Event Information	
Is the funding for: (please tick which is applicable)	<input checked="" type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	Lao New Year celebration 2016
Date(s) of Project/Event (if ongoing please state "ongoing")	mid April (depending on the hall availability)
Total cost of Project/Event	\$ 4,141
Amount of Community Grant Funding Requested	\$ 2,000
Is there any other information that you may feel is relevant to your application?	Funding from your Council would greatly help our small community celebrate our New Year and keeping our culture alive.
<input checked="" type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? (please check all that apply)	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 12

Project/Event Details		
Previous Community Grants Program Funding		
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No (go to Group/Organisation Information)
When was the Grant funding received (month & year):	April - 2015	
What amount of Grant funding was provided:	\$ 2,000	
When was the previous Grant acquitted (month & year):		
Group/Organisation Information		
Group/Organisation Name	Lao Association SA Inc	
Group/Organisation Description	Youth, Women and Elderly Community	
Group/Organisation Registered Address	Number/Street: [REDACTED] Suburb: Kudla Postcode: 5115	
Is the Club Incorporated?	Yes	
Number of Members	1000	
% of Membership that reside in the City of Salisbury	80%	
Project/Event Details		
Project/Event Name	Lao New Year Celebration	
Project/Event Summary	Lao New Year	
Date(s) of Project/Event	Mid April 2016 - Pending availability of Hall	
Location of Project/Event:	Number/Street: Cambodia Hall Suburb: Salisbury Postcode:	
How will the Project/Event benefit the residents of the City of Salisbury?	Bring people togetherness * Keeping culture alive	
How many individuals will benefit from the Project/Event?	Approx 300 - 400	
% of project/event participants that reside in the City of Salisbury	80%	
If it is an Event, is it open to the public?	Yes	
How will the Project/Event be promoted?	Postage, mouth to mouth, Announcement and advertising at the temple in Kudla	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 12

Grant Money Requested		
Amount Requested	\$ 2,000	
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>		
Cambodia Hall Hire	\$ 1,500	
Decorations	\$ 200	
Tablecloths, cutlery etc	\$ 200	
Printing & Postage	\$ 100	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL (including GST):	\$ 2,120.00	
Quote Attached:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>
<i>A detailed, current quote <u>must</u> be provided with the application.</i>		

* Hall hire ^{quote} will be provided once the Cambodia officer return my called.
Have been calling the officer Soukiv on [REDACTED]
upto today date am still waiting for the return call.
last year hall hire costs \$1,500. (function held on 18/4/18).

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 8 of 12

Project or Event

*** Support for the** *Project or Event Scope*

Provide a description of the proposed project or event:

I, Mr Somphanh Phakonekham the President of Wat Lao Adelaide is delighted that the Lao Association SA is holding our yearly New Year celebration. As majority of Lao People residing in the Northern district such as Salisbury, Burton, Parafield Garden etc. I know that this yearly event will bring our people togetherness and knowing that your funding will greatly help our small community celebrate and keeping our culture alive.

Every assistance provided by your Council is greatly appreciated.

I Thank your Council.


Attachments

☒ There are no attachments relating to the Project or Event Scope.

☐ The following documents are attached relating to the Project or Event Scope:

- 1.
- 2.
- 3.

*MR Somphan Phakonekham
Wat Lao President*



Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

The benefits and outcome of the event will bring our culture alive.

Lao New Year (known as Pee Mai in Lao), is the most important event on the Lao calendar, and marks the first day of the solar year. Unlike the Chinese Lunar New Year, which is celebrated on a different date each year, Lao New Year is always celebrated on or around April 14.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 12

Provide Project or Events Scope**Support for the Project or Event**

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

Project or Events Scope

The event is a one night celebration which will take place at the Cambodia Hall at Salisbury Highway. The celebration will commence from 6pm and ended 12 midnight.

Attachments

- ☐ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event ManagementOngoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

6pm-12am
 This is a one off events. commencing 6pm-12 midnight
 This celebration / event is a joint ventures with the Lao Women's Group, the Youth Group, & Lao Ethnic School.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 12

Application Declaration	
Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)	
Please read, tick the boxes and sign:	
S1	S2
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
On behalf of <u>The Lao Association of SA Inc</u> (Group/Organisation)	
(Name/Position)	MR Seuksavanh Vorakoomane and (Name/Position)
<u>President</u>	<u>Vicky Hnang</u>
(Signature 1)	(Signature 2)
<u>11/02/16</u>	<u>11/02/16</u>
(Date)	(Date)



to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 12



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input checked="" type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 12

ITEM	7.2.4
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	13/2016: SecondBite - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The SecondBite Application is submitted to the Sport, Recreation and Grants Committee for information.

RECOMMENDATION

1. The information be received and noted.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 13/2016: SecondBite - Application

1. BACKGROUND

- 1.1 SecondBite applied for Community Grants Program funding in March 2015 however the application was unsuccessful due to the organisation being registered as an Australian Public Company and consequently ineligible at that time.
- 1.2 The SecondBite Application (attachment 1) was received for the April 2016 round of Community Grants Program funding.
- 1.3 The Application was incomplete and required further information.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The SecondBite Application is incomplete and the following further information was requested:
- 3.1.1 The Project or Event Management section is incomplete and must be provided;
 - 3.1.2 Contact phone numbers are required for the signatories;
 - 3.1.3 Delivery costs are not eligible for Community Grants Program funding therefore we request that page 9 is resubmitted itemising the breakdown of costs for eligible item/s;
 - 3.1.4 A detailed, current quote must be provided.
- 3.2 The additional information has not been received and therefore the Application is deemed ineligible as per clause 11.2 of the Community Grants Program Guidelines and Eligibility Criteria:
- Applications that are incomplete or do not contain all essential documentation may be considered ineligible or result in deferral to a subsequent round to enable an assessment to be made pending receipt of the incomplete/additional information. Applicants are requested to submit additional information within the timeframe for submission to the next round. Should the additional information not be received within three (3) months of receipt of the original application the application will be deemed ineligible and the organisation or group must submit a new application should it wish to proceed with applying for Community Grant funding.*
- 3.3 The Applicant has been notified that their Community Grants Program Application has lapsed.

4. CONCLUSION / PROPOSAL

- 4.1 The SecondBite Application is submitted for information as per clause 11.6 of the Community Grants Program Guidelines and Eligibility Criteria:
- Applications received that are identified ineligible against the funding guidelines are submitted to the Sport, Recreation and Grants Committee for information. A copy of the application and any other relevant document(s) is presented to the Sport, Recreation and Grants Committee in its entirety as an attachment to the Committee Report as outlined in paragraph 11.4.*

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016

From: Sarah Davies [sarah@secondbite.org]
Sent: Tuesday, 15 March 2016 5:18:09 PM
To: City of Salisbury
Subject: SecondBite - application for community grant

Dear Community Grants, City of Salisbury,
SecondBite submits the attached application together with supporting documentation for your consideration.
We are very grateful for your consideration of our application and look forward to your Council's response.
With kind regards
Sarah Davies

Sarah Davies
Fundraising, Trusts & Foundations
73 McClure Road
Kensington, VIC 3091
Telephone: (03) 9376-3800


www.secondbite.org

 Description: Description:
Description:
cid:image001.png@01CC34C
B:C73F1F70



In 2015 SecondBite sourced and redistributed over 7 million kilograms (7,000 tonnes) of high quality surplus fresh food to 1,240 agencies, schools/kindergartens, refuges and soup vans, increasing access to affordable fresh food for people in need across Australia.
Your donation can make a real difference: [click here](#)
♻️ Please consider the environment before printing this message

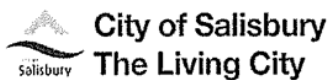


Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	SecondBite	
Address:	73 McClure Road,	
Suburb:	Kensington	Postcode: 3031
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mr <input type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Sarah Davies	
Title (your role with the group/organisation):	Fundraising, Trusts & Foundations	
Address:	73 McClure Road, Kensington, Vic 3031	
Phone:	Landline: 03 93763800 Mobile: [REDACTED]	
Email:	sarah@secondbite.org	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Paul Sumlin	
Title (role with the group/organisation):	SecondBite State Manager, SA	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	Board, CEO, Executive Management	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	110 251 613	
b) Operated under a Parent Organisation: (please state which parent organisation you operate under below AND attach a supporting letter from the organisation)	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:	✓	
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input checked="" type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input checked="" type="checkbox"/> (go to question e & f)	No <input type="checkbox"/>
e) Funding source/s:	SecondBite received 9% of its income in FY 2014/2015 from Government - \$125,000 from the Department of Social Services; \$75,000 from the Tasmanian State Government and grants from various local governments.	
f) Purpose:	To address food insecurity in disadvantaged communities.	
g) Other (please specify):	Yes <input checked="" type="checkbox"/> SecondBite has received a \$20,000 grant from the Morialla Trust for SecondBite's State Manager SA salary in FY 2015/2016	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: [REDACTED] <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	Ms Lin Good	
Referee's Contact Information:	Community Support Services Manager, Salvation Army Ingle Farm Phone: 08 83979333	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> _ 6 _ 6 _ 1 _ 1 _ 6 _ 2 _ 5 _ 1 _ 5 _ 1 _ 3 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information		
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<i>If Yes, provide details:</i>		
INCOME	\$ AMOUNT	
Project or event generated income:	\$ SecondBite has received the following: - \$20,000 funding from the Morialta Trust in FY 2015/2016 for SecondBite's State Manager SA FT salary; - \$48,000 from Community Benefit SA to purchase a van in SA.	
Organisation's contribution:	\$ SecondBite is paying the rent for our SA warehouse at 6 Acorn Road, Dry Creek S46094	
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	\$ \$20,000 - Morialta Trust for SA State Manager salary	
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	\$ None	
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	\$ Coopers Foundation - \$15,000 IOOF Foundation - \$20,000 Other philanthropic donors - \$74,000	
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	\$ SecondBite is seeking philanthropic funders for our SA operations.	
TOTAL (including GST):	\$ \$129,000	
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?		
SecondBite is paying the rent for the warehouse premises at 6 Acorn Road, Dry Creek. SecondBite volunteers will help sort collected fresh food and undertake many of the smaller deliveries to agencies and schools in Adelaide.		
EXPENSES <i>(specify the proposed expense budget by item:)</i>	\$ AMOUNT	
SecondBite State Manager SA	\$ 55,000	
SecondBite Van Driver salary @ \$20 ph	\$ 40,000	
Warehouse rent for 6 Acorn Road, Dry Creek.	\$ 18,000	
Running costs of 2 refrigerated delivery vans @ \$120 plus registration, insurance and service costs (\$8,000 per van pa)	\$ 16,000	
	\$	
	\$	
	\$	
	\$	
TOTAL (including GST):	\$ \$129,000	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	SecondBite SA - improved nutrition, improved health of people in need in South Australia
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	Commencing 1 May 2016 to 30th April 2017.
Total cost of Project/Event	\$ 129,000
Amount of Community Grant Funding Requested	\$ 2,000
Is there any other information that you may feel is relevant to your application?	<p>SecondBite has worked with the Salvation Army in Adelaide and created a Market Place which takes place each Friday as set out in the attached link: http://www.salvationarmy.org.au/adelaide/</p>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: <ol style="list-style-type: none"> 1. We attach a Letter of Support from Lin Goed of the Salvation Army Ingle Farm. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? (If Yes – when, amount granted and what the grant was for:)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	\$
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	SecondBite
Group/Organisation Description	SecondBite sources and redistributes high quality surplus fresh food for agencies, schools, refugees supporting people in need.
Group/Organisation Registered Address	Number/Street: 73 McClure Road Suburb: Kensington VIC Postcode: 3031
Is the Club Incorporated?	Yes
Number of Members	25 volunteers in Adelaide
% of Membership that reside in the City of Salisbury	The majority of agencies, schools and supported housing receiving SecondBite's deliveries in Adelaide operate in Salisbury - Elizabeth Playford etc
Project/Event Details	
Project/Event Name	SecondBite SA - improved nutrition, improved health of people in need in South Australia
Project/Event Summary	SecondBite is providing regular, consistent deliveries of 30,000 kilograms of high quality fresh food - meat, dairy, eggs, fruit and vegetables - each month at no cost each month for 158 agencies, schools/kindergartens, refugees/hostels who are providing food relief for people in need in Adelaide.
Date(s) of Project/Event	Through our Project, vulnerable adults, children and young people in Adelaide will be able to access nutritious fresh food at no cost, improving their nutrition intake and improving their health, wellbeing and social inclusion.
Location of Project/Event:	Number/Street: 6 Acorn Road, Suburb: Salisbury Postcode: 5094
How will the Project/Event benefit the residents of the City of Salisbury?	Traditionally emergency food relief has provided canned long life foods. Agencies tell us that one of the most urgent things for their vulnerable clients is to increase their access and intake of fresh food, in accordance with the Australian Guidelines to Healthy Eating.
How many individuals will benefit from the Project/Event?	An estimated 9,000 adults, children and young people in Adelaide are benefiting from SecondBite's fresh food redistribution service. (158 recipient agencies x 80 people per agency)
% of project/event participants that reside in the City of Salisbury	An estimated 60% of the individuals and families accessing fresh food provided for agencies, schools/kindergartens and refugees/ supported accommodation will be live in the City of Salisbury.
If it is an Event, is it open to the public?	
How will the Project/Event be promoted?	SecondBite collaborates with our 158 SA based recipient agencies to deliver our service for their community food programs.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 8 of 13

Grant Money Requested		
Amount Requested	\$ 2,000	
Itemised Breakdown of Costs: <i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>		
Delivering 6,000 kilograms of high quality fresh food in the City of Salisbury providing 12,000 nutritious meals for people in need in the City of Salisbury at 0.35c delivered cost per meal	\$ 2,100	
	\$	
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	\$	
	\$	
	\$	
TOTAL (including GST):	\$ 2,100	
Quote Attached: <i>A detailed, current quote <u>must</u> be provided with the application.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 9 of 13

Benefits and Outcomes of the Project or Event
<p><i>Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:</i></p> <p>SecondBite research and our work with recipient agencies supporting vulnerable families, children and young people demonstrates the positive impact of working at a community level to increase regular access to nutritious fresh food. Agencies tell us that this enables them to improve the health, wellbeing and social inclusion of their vulnerable clients, which they otherwise cannot provide for their clients or their community.</p> <p>Through our Project, over 12 months SecondBite will provide the following social impact:</p> <ul style="list-style-type: none"> - redistributing 360,000 kilograms of high quality surplus fresh food, at no cost, for people in need in Adelaide; - providing 720,000 nutritious meals for people in need in Adelaide; - saving agencies \$1,080,000 (\$3 per kilo SROI); - saving 350,000 going to waste and instead to people who really need access to it, but who otherwise cannot afford nutritious fresh food.

Community Grant Application - Page 10 of 13

Support for the Project or Event
<p><i>Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:</i></p> <p><i>(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.</i></p> <p><small>All of SecondBite's service is in direct response to requests from agencies for help in increasing their clients access to healthy fresh food. SecondBite works with agencies to help them build up their food banks and helping them to develop their community meals programs, to respond to increasing numbers of individuals and families seeking food relief. Agencies seek SecondBite's fresh food redistribution service for their clients who include families in crisis, single parent households, individuals and families suffering homelessness or at risk of homelessness or children going without breakfast, lunch and often dinner.</small></p> <p>Attachments</p> <p><input type="checkbox"/> There are no attachments relating to Support for the Project or Event.</p> <p><input type="checkbox"/> The following documents are attached relating to Support for the Project or Event:</p> <ol style="list-style-type: none"> 1. 2. 3.

Project or Event Management
<p><u>Ongoing Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed into the future:</i> <i>(outline how you will ensure sustainability and achieve outcomes for the project or activity)</i></p> <p><u>One-off Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed:</i> <i>(outline how you will achieve outcomes for the project or activity)</i></p>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>SecondBite</u> (Group/Organisation)</p>	
<p><small>Sarah Davies, Fundraising, Trusts & Foundations (Name/Position)</small></p> <p style="font-size: 1.2em; margin-top: 10px;"><i>Sarah Davies</i></p> <p style="margin-top: 5px;">(Signature 1)</p>	<p style="text-align: center;">and</p> <p><small>Katherine Pengilly General Manager, Fundraising (Name/Position)</small></p> <p style="font-size: 1.2em; margin-top: 10px;"><i>Katherine Pengilly</i></p> <p style="margin-top: 5px;">(Signature 2)</p>
<p style="font-size: 1.2em; margin-top: 10px;">15.3.16.</p> <p style="margin-top: 5px;">(Date)</p>	<p style="font-size: 1.2em; margin-top: 10px;">15.3.16.</p> <p style="margin-top: 5px;">(Date)</p>
<p>Contact (phone number):</p>	<p>Contact (phone number):</p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your application will not be submitted for consideration until contact and verification has occurred, **no exception.**

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 13

Elizabeth South Community Centre	Recipient	Hope Central Church	51 Goodman Road	100 Philip Hwy	Elizabeth South
Salisbury Youth Enterprise Centre	Recipient		17 Wiltshire St		Salisbury
Aboriginal Prisoners & Offenders Support Service (APOSS)	Recipient		19-23 Cypress Street		Adelaide
Adelaide Zoo	Recipient		Frome Road		Adelaide
ADRA - Melrose Park	Recipient		123 Edwards Street		Melrose Park
ADRA - Mount Barker DD	Recipient		8 Shoebridge Lane		Mt Barker
ADRA - Southern	Recipient		73 Hackney Road		Hackney
ADRA-Prospect	Recipient		31 Prospect Road		Prospect
Advocate Development and Relief Agency (ADRA)	Recipient	Building 2	1a Lawrence Hargraves Way		Parafield
AGesture/Secondbite Elizabeth	Recipient		5 wiley street		Elizabeth South
Andrews Farm Junior Soccer Club	Recipient	Kalara Reserve	Petherston Road		Davoren Park
Anglicare Elizabeth - Platform	Recipient		73 Elizabeth Way		Elizabeth
Anglicare SA Elizabeth Mission-Soup Kitchen	Recipient		91-93 Elizabeth Way		Elizabeth
Aspire College	Recipient		28 Philip Highway		Elizabeth
AWL	Recipient		1-19 Cormack Road		Wingfield

Balaklava Church of Christ Community Care Inc	Recipient		29 Wallace Street		Balaklava
Balaklava Primary School	Recipient		Wallace Street		Balaklava
Baptist care - Westcare	Recipient		17 millers court		Adelaide
Baptist care modbury	Recipient	Suite 5	102 reservoir rd		Modbury
Baptist care Salisbury	Recipient	Unit 1	42 Commercial road		Salisbury
Baptist Care Smithfield	Recipient		288 Anderson walk		Smithfield
Barkuma	Recipient		191-193 Philip Highway		Elizabeth South
Blair Athol Drop Off (c/o Randalls Hardware)	Recipient		440 Prospect Rd		Prospect
Blair Athol Uniting Church	Recipient		379 Prospect Rd		Blair Athol
BlazeAid South Australia	Recipient		xxx		Palmer
Bowden Community School	Recipient		55 Downton Avenue		Salisbury North
BoysTown	Recipient		24 Langford Drive		Elizabeth
Breakfast Bellies	Recipient		1 Scotland Road		Mile End
Bubble n Squeak Child Development Centre	Recipient		36 Crittenden Road		Smithfield Plains
CareWorks SA	Recipient		114 Henley Beach Road		Torrensville
Centacare - Targeted Intervention Service	Recipient		34 Yorktown Road		Elizabeth Park
Centacare Youth Services	Recipient		5 Hewitt Rd		Elizabeth south
Elizabeth Centre for Equality (Youth on the Move)	Recipient		81 Currie Street		Adelaide

Christies Beach Baptist Church	Recipient		8 Fowery Street		Christies Beach
Church of Christ Blair Athol	Recipient		379 Prospect Rd		Blair Athol
City of Playford - Marni Waiendi/Kuana Plains Children Centre	Recipient		83 Ridley Road		Elizabeth South
City Soul Uniting Church	Recipient	C/O Experience Cafe	13 Hutt Street		Adelaide
Closing the Gap - Northern Health Network	Recipient		2 Peachy Road		Elizabeth
Clovercrest Baptist Church-Pathway	Recipient		1/249 Milne Road		Modbury North
Comedy capers gang show	Recipient		Po box 941		Salisbury
Community Food SA Inc	Recipient	Shop 5	580 Main North Road		GEPPS CROSS
Cos We Care	Recipient		4 Westport Road		Edinburgh North
Craigmore Christian Church	Recipient		213 Yorktown Road		Craigmore
Craigmore High School - Pastral Care	Recipient		2 Jamieson Road		Blakeview
Craigmore South Primary School	Recipient		Turner Drive		Craigmore
Davoren Park Youth & Community Club	Recipient	Davoren Park Shopping Centre	13/45 Peachey Road		Davoren Park
DECD Family Day Care	Recipient		20 Langford Drive		Elizabeth
Diamond House	Recipient		19 Kilkenny Rd		Woodville Park
Eagles Football Club	Recipient		Oval Avenue		Woodville

Edwardstown Baptist Church - Food Hamper	Recipient		Crn Rothsay Ave and Dorene St		St Marys
Elizabeth Church of Christ - Engage Youth	Recipient		Corner Short and Ashfields Road		Elizabeth
Elizabeth Downs Primary School	Recipient		Heard St		Elizabeth Downs
Elizabeth Fred's Van - Vincent de Paul Society	Recipient		8 Langford Drive		Elizabeth
Elizabeth Grove Primary School	Recipient		20 Hayes St		Elizabeth Grove
Elizabeth Seventh Day Adventist	Recipient		P16-20 Peterswool Rd		Elizabeth Park
Elizabeth South Primary School	Recipient		Chivell Street		Elizabeth South
Elizabeth Vale Primary School	Recipient		Rollison Road		Elizabeth Vale
Empire Hotel Social Club	Recipient		414 Prospect Road		Kilburn
Foodbank SA (recipient)	Recipient		377A Cross Road		Edwardstown
Freedom Ministries	Recipient		11 Pilsdon Street		Davoren Park
Fremont-Elizabeth City High School	Recipient		Philip Hwy		Elizabeth
Gawler and Districts College	Recipient		Barnett road		Evanston
Gawler Community House	Recipient		2 Scheibener Terrace		Gawler
Good Beginnings Australia	Recipient		20 Hayes St		Elizabeth Grove
Heart and Soul Community Group - DD	Recipient		14 Third Street		Wingfield

Helping Hand	Recipient		Corner of Fosters Road and East Parbury		Northgate
Humbug Scrub Sanctuary	Recipient		Humbug Scrub Road		One Tree Hill
HYPAC Elizabeth	Recipient		73 Elizabeth Way		Elizabeth
Incompro Aboriginal Association Inc	Recipient	Shop 14	41 Bagster Road		Salisbury North
Kaurna Plains School	Recipient		Ridley road		Elizabeth
Keller Road Primary School	Recipient		Keller Road		Salisbury East
Kick Start For Kids	Recipient		377A Cross Roads		Edwardstown
Kilburn Football Club	Recipient	Blair Athol Oval	Lionel Street		Blair Athol
Kilkenny Primary School (Grove)	Recipient		Jane Street		Croydon
Korvest Social Club	Recipient		500 Prospect Road		Prospect
Learning Together - Smithfield Plains Kuana Playgroup	Recipient		2 Woodford Road		Elizabeth
LeFevre High School	Recipient		90 Hart Street		Semaphore South
LeFevre OSHC	Recipient		Shorney Street		Birkenhead
LeFevre Primary School	Recipient		Shorney St.		Birkenhead
Life Care Modbury	Recipient		953 North East Road		Modbury
Life Church - Munno Para	Recipient		Crn, Karri St, Maltarrards		Munno Para
Lions Club Charles Sturt	Recipient		PO Box 253		Woodville
Living Faith Cares	Recipient		1238 North East Road		St Agnes

Lutheran Community Care SA Madison Park Primary School	Recipient		309 Prospect Road		Blair Athol
Marion LIFE Community Services	Recipient		19 Lincoln Avenue		Salisbury East
Mark Oliphant Children's Centre Mission	Recipient		887 Marion Rd		Mitchell Park
Australia - Christies Beach Mission	Recipient	1	99 Douglas Drive		Munno Para
Australia - Kilkenny Mission	Recipient	Unit 3	122 Beach Road		Christies Beach
Australia Elizabeth SA Mission	Recipient	Level 1 Windsor Building	10-14 Regency Road		Kilkenny
Australia Elizabeth TAFE	Recipient	Building G22 Elizabeth TAFE	Elizabeth city centre		Elizabeth
NO longer a recipient Novita Childrens Services	Recipient		Woodford Road		Elizabeth
Noarlunga Football Club	Recipient		17 Bagster Road		Salisbury North
North East Community Assistance Project	Recipient		Patapinda Road		Old Noarlunga
North East Community Project	Recipient		4898 North East Road		Hillcrest
Northern Adelaide Senior College	Recipient		489B North East Road		Hillcrest
Northern Area Community and Youth Services Inc.	Recipient		2 Woodford Road		Elizabeth
Northern communitie s of hope	Recipient		Oldford Road and Heard Street		Davoren Park
			cm Pritchard st and Heytesbury Rd		Davoren Park

Northern Districts Cricket Club	Recipient		Orange Ave		Salisbury
Northern Sound System	Recipient		73 Elizabeth Way		Elizabeth
NOT A RECIPIENT - HYPA - Service to Youth Adelaide	Recipient		135 Currie St		Adelaide
NOT A RECIPIENT Mark Oliphant College- Food for	Recipient		99 Douglas Drive		Munno Para West
Omega Fire Ministries	Recipient		7 Wallaby Street		Munno Parra
One Tree Hill Childrens Farm	Recipient		One Tree Hill Road		One Tree Hill
Op Help the Homeless	Recipient		66A East Terrace		Gawler East
OPAL City of Playford	Recipient		12 Bishopston e rd		Davoren Park
OSHC Elizabeth North Primary OSHC	Recipient		141 Woodford Rd		Elizabeth North
Immanuel Lutheran School	Recipient		11 Lyndoch Road		Gawler East
Para West Adult Campus Para	Recipient		23 Crafter Street		Davoren Park
Worklinks Incorporated	Recipient		112 Coventry Road		Smithfield Plains
Paralowie R-12 School	Recipient		Whites Road		Paralowie
Peachy Place Living skills centre- lutheran community care	Recipient		50 Peachy Rd		Daroren Park

Playford Childrens Centre -4 Langford Drive	Recipient		4 Langford Drive		Elizabeth
Playford Community Fund	Recipient	Elizabeth S/C	Level 2	Windsor Building	Elizabeth
Playford Food Co-op Elizabeth	Recipient	shop 5	34 Hamblynn Rd		Elizabeth Downs
Playford Food Co-op Smithfield	Recipient	shop 3a	240 Peachy Rd		Smithfield Plains
Playford Mcauley Campus OSHC	Recipient		210 Adams Road		Craigmore
Playford Phantoms Softball Club	Recipient		14 Brooklyn Avenue		Salisbury
Playford Uniting Church	Recipient		c/o 5 Hugh Avenue		Para Hills West
Relationshi ps Australia SA - Adelaide CBD	Recipient	Level 1	191 Flinders Street		Adelaide
Relationshi ps Australia SA - Elizabeth	Recipient	Go Around the Back	13 Elizabeth Way		Elizabeth
Relationshi ps Australia SA - Port Adelaide	Recipient		8 Butler Street	Crn Lipson	Port Adelaide
SA - Volunteer allowance	Recipient		39 Kinkaid Road		Elizabeth East
SA RSL Head Office	Recipient		Victoria Drive		Adelaide
SA Variety Club	Recipient		68 Richmond Road		Keswick
Salisbury East Alternate Learning	Recipient	Salisbury East High School	50 Smith Road		Salisbury East
Salisbury Fred's Van St Vincent de Paul	Recipient		Church Road		Salisbury

Salisbury High School	Recipient		14 Farley Grove		Salisbury North
Salisbury North Childcare Centre	Recipient		102 Diment Road		Salisbury North
Salisbury North R-7 School	Recipient		38 Bagster Road		Salisbury North
Salt Church Gawler	Recipient		25 Northside Court		Evanston Gardens
Sandy Creek Primary School	Recipient		Davies Road		Cockatoo Valley
Seaton Park Primary School	Recipient		80 Balcombe Avenue		Seaton
South Downs Primary School	Recipient		Mavros Rd		Elizabeth Downs
St Mary Magdalene's School	Recipient		82 Fairfield Road		Elizabeth Grove
Swallowcliffe PRE SCHOOL	Recipient		Oldford Street		Davoren Park
Swallowcliffe Primary School	Recipient		Swallowcliffe Rd		Davoren Park
The Association of the Burundian Community of SA Inc.	Recipient		6/50 Peachey Rd		Davoren Park
The Port Church Inc	Recipient		47 Carnavon Trc		Largs North
The Salvation Army Adelaide	Recipient		227 Pirie Street		adelaide
The Salvation Army-Burlendi Youth Housing	Recipient		22 Spains Road		Salisbury Downs
The Salvation Army Gawler	Recipient		150 Murray Street		Gawler
The Salvation Army Ingle Farm	Recipient		Cnr Bridge and Maxwell Roads		Ingle Farm

The Salvation Army Kilkenny SA	Recipient		1-7 Gray Street		Kilkenny
The Salvation Army Playford Community Support	Recipient		39 Kinkaid Road		Elizabeth East
The Smith Family-Elizabeth Vale	Recipient	Elizabeth Vale Primary School	Rollison Rd		Elizabeth Vale
The Stables Christian Centre	Recipient		12 Brodie Road		Huntfield Heights
The Workabout Centre - Dept for Education & Child Development	Recipient	C/- Kaurna Plains School	Ridley Road		Elizabeth
UCare Gawler - DD	Recipient		10 Todd Street		Gawler
Uniting Care Wesley Port Adelaide	Recipient		58 Dale St		Port Adelaide
Uniting Church Plympton	Recipient		364a Marion Rd, Plympton		Plympton
Uniting In Care Salisbury	Recipient		1 Brown Tce		Salisbury
UnitingCare Wesley Port Adelaide Youth Services	Recipient		94 Waterloo Corner Road		Woodville
Whitelion - Croydon Park	Recipient	Croydon Tafe Campus	49 Goodall Ave		Croydon Park
Whitelion-Salisbury North	Recipient		41 Bagster Road		Salisbury North
Wildwood Park	Recipient		275 Mueller Road		Cambrai
Wilos Mens Shed	Recipient		5 Little Paxton Street		Willason

Youth with a Mission - Elizabeth	Recipient		7 Wishford		Elizabeth
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SOUTH AUSTRALIA DIVISION
Australian Southern Territory

23rd July, 2014

The Salvation Army Ingle Farm
Crn Bridge & Maxwell Roads
Ingle Farm SA 5098

SecondBite
5 Wiley Street
Elizabeth SA 5112

To whom it may concern,

Every week, sometimes twice a week, I pick up fresh fruit, vegetables, buns etc from SecondBite. This enables me to be able to run a "You Can Cook" program where we train/show young adults and young mums on how they can cook easy meals with products that are easily accessible.

I am also the Manager of Community Support Services at Ingle Farm Salvation Army where we help over 100 families weekly with food etc. Before receiving the help from SecondBite we were giving out tin food. Now it is wonderful to be able to see our clients leaving our building with fresh fruit and vegetables and also being able to include these people in our cooking classes.

In the next few months I want to start a new program called "The Market Place" where SecondBite will be playing a huge part in supplying fruit and vegetables etc for us to be able to give to our Clients.

SecondBite has changed the way we have been able to help people in our community.

If you require more information, please do not hesitate to contact me.

Yours sincerely,

Lin Goed
Fundraising & Community Support Services Manger

The Salvation Army Ingle Farm
Corner Bridge & Maxwell Roads, Ingle Farm, SA 5098
PO Box 144, Para Hills SA 5096
Telephone 08 8397 9333
Facsimile 08 8396 5170

William Booth *Founder*
André Cox *General*
Floyd Tidd *Territorial Commander*

Transforming Lives
Caring for People
Making Disciples
Reforming Society

salvationarmy.org.au

ITEM	7.2.5
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	14/2016: Interchange Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Interchange Inc. Application is submitted to the Sport, Recreation and Grants Committee for information.

RECOMMENDATION

1. The information be received and noted.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 14/2016: Interchange Inc. - Application

1. BACKGROUND

- 1.1 The Interchange Inc. Application was received for the April 2016 round of Community Grants Program funding.
- 1.2 The Application was incomplete and required further information.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Interchange Inc. Application is incomplete and the following further information was requested:

- 3.1.1 How your group/organisation is managed;
- 3.1.2 Contact phone numbers for the signatories;

- 3.2 The Applicant was advised that fuel related expenses are not eligible for Community Grants Program funding.

- 3.3 The additional information has not been received and therefore the Application is deemed ineligible as per clause 11.2 of the Community Grants Program Guidelines and Eligibility Criteria:

Applications that are incomplete or do not contain all essential documentation may be considered ineligible or result in deferral to a subsequent round to enable an assessment to be made pending receipt of the incomplete/additional information. Applicants are requested to submit additional information within the timeframe for submission to the next round. Should the additional information not be received within three (3) months of receipt of the original application the application will be deemed ineligible and the organisation or group must submit a new application should it wish to proceed with applying for Community Grant funding.

- 3.4 The Applicant has been notified that their Community Grants Program Application has lapsed.

4. CONCLUSION / PROPOSAL

- 4.1 The Interchange Inc. Application is submitted for information as per clause 11.6 of the Community Grants Program Guidelines and Eligibility Criteria:

Applications received that are identified ineligible against the funding guidelines are submitted to the Sport, Recreation and Grants Committee for information. A copy of the application and any other relevant document(s) is presented to the Sport, Recreation and Grants Committee in its entirety as an attachment to the Committee Report as outlined in paragraph 11.4.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016



Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Interchange Inc.	
Address:	6 George Street	
Suburb:	Stepney	Postcode: 5069
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Ms Marianne Collins	
Title (your role with the group/organisation):	CEO	
Address:	6 George Street, Stepney, SA, 5069	
Phone:	Landline: 8132 5300 Mobile: [REDACTED]	
Email:	marianne@interchangesa.org.au	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Ms Lindy Allchurch	
Title (role with the group/organisation):	Placement Co-ordinator	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:		
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	10985T	
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input checked="" type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input checked="" type="checkbox"/> (go to question e & f)	No <input type="checkbox"/>
e) Funding source/s:	HACC & NDA	
f) Purpose:	Interchange funding	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Interchange Inc.</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	Frank Ghion	
Referee's Contact Information:	frankghion@disabilityliving.org.au, 8132 5400	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 8 5 2 1 9 0 2 9 0 4 0 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NB: GST Registration <i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <small>(enter '0' dollar amounts below)</small>
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	\$ 600
Organisation's contribution:	
Income received from other Grants: <small>(list organisation(s) providing Grant funding and their contribution)</small>	
Income received from sponsors: <small>(list sponsor(s) and their contribution)</small>	
Donations: <small>(please specify the source, product or service and estimated amount of funding requested)</small>	
Have you sought any other funding for the project: <small>(please specify the source and amount of funding requested)</small>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 600
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	<i>Assessment of children, co-ordination of groups and staff wages. All administration expenses</i>
EXPENSES <small>(specify the proposed expense budget by item:)</small>	\$ AMOUNT
<i>Active staff wages</i>	\$ 7,054
<i>Program Co-ordination wages</i>	\$ 2,660
<i>Venue Hire</i>	\$ 1,200
<i>Van Hire</i>	\$ 1,242
<i>Petrol</i>	\$ 624
TOTAL (including GST):	\$ 12,780

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Kids Connect & Friends Connect (North)</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Initially groups to run every fortnight from April 30 2016 for 10 weeks.</i>
Total cost of Project/Event	<i>\$ 12,780</i>
Amount of Community Grant Funding Requested	<i>\$ 3,064</i>
Is there any other information that you may feel is relevant to your application?	<input type="checkbox"/> There are no relevant attachments. <input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. <i>Proposed outline for Kids Connect</i> 2. <i>Proposed outline for Friends Connect</i>
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input checked="" type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input checked="" type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	<i>Interchange Inc.</i>
Group/Organisation Description	<i>Provides services to children/young adults with disabilities.</i>
Group/Organisation Registered Address	Number/Street: <i>6 George Street</i> Suburb: <i>Stepney</i> Postcode: <i>5069</i>
Is the Club Incorporated?	<i>Yes</i>
Number of Members	<i>250</i>
% of Membership that reside in the City of Salisbury	<i>20 %</i>
Project/Event Details	
Project/Event Name	<i>Kids Connect & Friends Connect</i>
Project/Event Summary	<i>Friendship groups for children with intellectual disabilities.</i>
Date(s) of Project/Event	<i>Fortnightly get togethers</i>
Location of Project/Event:	Number/Street: <i>Bagster Road Community Centre</i> Suburb: <i>Salisbury North</i> Postcode: <i>5108</i>
How will the Project/Event benefit the residents of the City of Salisbury?	<i>Opportunities for children to connect with their peers and community.</i>
How many individuals will benefit from the Project/Event?	<i>20 This figure represents direct participants. If we take into account family members who will benefit, figure closer to 100.</i>
% of project/event participants that reside in the City of Salisbury	<i>75 %</i>
If it is an Event, is it open to the public?	<i>No</i>
How will the Project/Event be promoted?	<i>On our website, quarterly newsletter and to interested families.</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Project or Event Scope

Provide a description of the proposed project or event:

Interchange is a not for profit organisation based in Stepney. Our main goal is to provide a broad range of opportunities for children and young people with intellectual disabilities to share in community life, fun and friendships.

In late 2015 we conducted a phone survey to ascertain the needs of our younger participants. We received an overwhelming result indicating the real need for social groups for a significant number of children in the Salisbury council area who are in great danger of becoming socially isolated, due to not only their disability, but also the fact that they often attend schools outside of the local council area and therefore do not get an opportunity to meet other local children.

We intend to establish two groups for these children 'Kids Connect' and 'Friends Connect'. Participants in 'Kids Connect' will be aged between 6-10 and 'Friends Connect' aged 10-14. We have already made contact with the Bagster Road Community Centre and intend to run both groups as a centre-based group on consecutive Saturdays from 10.00am-3.00pm.

Both groups will be modeled on other similar group programs that Interchange runs throughout the metropolitan area of Adelaide.

We would welcome the Council's involvement in any way and would welcome suggestions and input into the running of 'Kids Connect & Friends Connect'.

Attachments

- ☒ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Kids Connect & Friends Connect aims to benefit participants as their will be a strong emphasis on supporting the children to learn and develop the skills necessary to participate in community life. In particular developing social and independent living skills including the following outcomes: choice making, transport training, money handling, shopping food preparation and personal care support, recognizing emotions, sharing turn taking, negotiating and positive behaviours.

In addition to the benefits to the participants of both groups, the families will also benefit as they are able to have an opportunity to have a break from the child with high needs, as often they are unable to complete basic daily tasks whilst the child is in their care.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

We have had overwhelming support from local families registered with Interchange. There are many families in the City of Salisbury who have not been able to access any of our services in the past. A resounding response from these families was the distance they needed to travel to attend any of our current groups.

We also intend to involve local volunteers with the Group so that potential 1:1 Mentors can be established outside of the group situation. Interchange trains and police checks all of our volunteers prior to them taking up a position with us. This will give local people the opportunity to gain valuable experience whilst working in the disability field.

Attachments

☒ There are no attachments relating to Support for the Project or Event.

☐ The following documents are attached relating to Support for the Project or Event:

- 1.
- 2.
- 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:

(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events


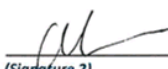
Describe how the proposed project or event will be managed:

(outline how you will achieve outcomes for the project or activity)

Interchange foresees that Kids Connect and Friends Connect will become self funded within 12-18 months as the participants in the group move across to the NDIS. Currently however the proposed participants do not have funding and their families are desperate to receive a service of this kind from Interchange.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration	
<p style="color: red; font-weight: bold;">Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of _____ (Group/Organisation)</p>	
<p>KAREN REJTOY TREASURER and</p> <p>(Name/Position)</p>	<p>MARIANNE COLLINS CEO</p> <p>(Name/Position)</p>
 _____ (Signature 1)	 _____ (Signature 2)
<p>15TH MARCH 2016</p> <p>(Date)</p>	<p>15TH MARCH 2016</p> <p>(Date)</p>
Contact (phone number):	Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13

KIDS CONNECT—NORTH

Day Outline

9.00am Staff arrive at office, pack vehicle and drive to Community Centre

9.30am Staff set up activities for the day

10.00am Families arrive

11.00am Cooking Experience—preparing lunch and/or afternoon tea

12.00pm Lunchtime

1.00pm Focus Activity

2.00pm Focus Activity

2.30pm Pack Up Time

3.00pm Families pick up / Write reports

3.30pm Staff leave Community Centre and drive back to office

4.00pm Staff shift ends

FRIENDS CONNECT—NORTH

Day Outline

- 9.00am** Staff arrive at office, pack vehicle and drive to Community Centre
- 9.30am** Staff set up activities for the day
- 10.00am** Families arrive
- 11.00am** Cooking Experience—preparing lunch and/or afternoon tea
- 12.00pm** Lunchtime
- 1.00pm** Focus Activity
- 2.00pm** Focus Activity
- 3.00pm** Focus Activity
- 3.30pm** Pack Up Time
- 4.00pm** Families pick up / Write reports
- 4.30pm** Staff leave Community Centre and drive back to office
- 5.00pm** Shift ends

12/03/2025 11:21 0882507638

BAGSTER CDM CENTER

PAGE 02

Bagster Road Community Centre Inc

17 Bagster Road
Salisbury North SA 5108

A.B.N. 47 961 231 060

Bill To:

Interchange SA
6 George Street
STEPNEY SA 5069

Tax Invoice

Invoice #: 00003756

Date: 11/03/2016

Page: 1

Description	Amount	Code
Attention: Jessica Arthur, Program Coordinator		
10 week Hire of Creche for Term 2 2016	\$1,200.00	GST

Banking Details: Bank SA BSB 105-056
Account Number 101562040

Your Order #:	Customer ABN:	Freight:	\$0.00 GST
	Terms: Net 30th after	GST:	\$109.09
CODE	RATE	GST SALE AMOUNT	Total Inc GST:
GST	10%	\$109.09 \$1,090.91	\$1,200.00
		Amount Applied:	\$0.00
		Balance Due:	\$1,200.00

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Lindy Allchurch

From: Jessica Arthur
Sent: Tuesday, 15 March 2016 12:03 PM
To: Lindy Allchurch
Subject: FW: Commuter Van Bookings

From: [REDACTED]
Sent: Thursday, 10 March 2016 3:51 PM
To: Jessica Arthur
Subject: RE: Commuter Van Bookings

Hi,

I am able to supply the 12 seaters from the 7th of May onwards.

The vehicle hire is \$124.26 per 24 hour hire.

Included is 200 free km's per day and .30c a km's for any excess km's.

Standard excess applies.

If you wish to go ahead and book these date please let me know.

Thank you

From: Jessica Arthur [REDACTED]
Sent: Thursday, 10 March 2016 2:22 PM
To: [REDACTED]
Subject: Commuter Van Bookings

Hi Tonianne,

As per our phone conversation we would like a quote please for a commuter van on the following dates;

- Saturday 30th April
- Saturday 7th May
- Saturday 14th May
- Saturday 21st May
- Saturday 28th May
- Saturday 4th June
- Saturday 18th June
- Saturday 25th June

Kind regards,



Jessica Arthur
Program Coordinator
Interchange SA
6 George Street
Stepney SA 5069

Ph: 8132 5300
Fax 8363 7388



This email may contain confidential information. If you are not the intended recipient you must not disclose or use the information contained in it. If you have received this email in error please notify us immediately by return email and delete the document. Interchange accepts no liability for any damage caused by this email or its attachments due to viruses interference interception corruption or unauthorised access.

CERTIFICATE OF INCORPORATION OF AN ASSOCIATION

Paragraph 20 (1) (c) and Regulation 18 (3)



Registered No. 109857

ASSOCIATIONS INCORPORATION ACT, 1985

THIS IS TO CERTIFY that

INTERCHANGE

has incorporated under the

28th

day of

November

1986

incorporated under the Associations Incorporation Act, 1985.

GIVEN under the seal of the Corporate Affairs Commission at Adelaide this

28th

day

of

1986



[Signature]

Commissioner for Corporate Affairs

ITEM	7.2.6
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	22/2016: Salisbury East Little Athletics Centre Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Salisbury East Little Athletics Centre Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
 - a. Grant No. 22/2016: Salisbury East Little Athletics Centre Inc. be awarded the amount of **\$2,500.00** to assist with the purchase of uniforms for ongoing use as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 22/2016: Salisbury East Little Athletics Centre Inc. - Application
2. 22/2016: Salisbury East Little Athletics Centre Inc. - Additional Information

1. BACKGROUND

- 1.1 Salisbury East Little Athletics Centre Inc. received \$1,800 Community Grant funding in May 2009 towards the purchase of a portable PA system for ongoing use.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Salisbury East Little Athletics Centre Inc. has requested \$2,000 Community Grants Program funding to assist with the purchase of uniforms. Staff have recommended funding for \$2,500 as a result of Council Resolution 1228/2016; Monday, 25 July 2016 as the quote provided for uniforms is in excess of the recently increased upper limit Community Grants Program funding.
- 3.2 The Salisbury East Little Athletics Centre Inc. Application meets the eligibility criteria for the upper limit Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Salisbury East Little Athletics Centre Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



City of Salisbury
The Living City

Live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

***If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.***

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Salisbury East Little Athletics Centre	
Address:	Rundle Road, Rundle Reserve	
Suburb:	Salisbury South SA	Postcode: 5109
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mrs Jenni Dansie	
Title (your role with the group/organisation):	President	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	[REDACTED]	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Jenni Dansie	
Title (role with the group/organisation):	President	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:		
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A5335	
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Community Grant Application - Page 3 of 13

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:		
f) Purpose:		
g) Other (please specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Salisbury East Little Athletics Centre</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Sue Bowman</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 8 4 4 9 5 8 0 1 6 8 3 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>(enter '0' dollar amounts below)</i>
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	
EXPENSES <i>(specify the proposed expense budget by item:)</i>	\$ AMOUNT
Uniform	\$ 5,000
TOTAL (including GST):	\$ 5,000

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Uniform for new name</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Ongoing</i>
Total cost of Project/Event	<i>\$ 5,000</i>
Amount of Community Grant Funding Requested	<i>\$ 2,000</i>
Is there any other information that you may feel is relevant to your application?	
<input type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	Salisbury East Little Athletics Centre
Group/Organisation Description	Little athletics club
Group/Organisation Registered Address	Number/Street: Rundle Road, Rundle Reserve Suburb: Salisbury South, SA Postcode: 5109
Is the Club Incorporated?	Yes
Number of Members	200
% of Membership that reside in the City of Salisbury	70 %
Project/Event Details	
Project/Event Name	Uniform
Project/Event Summary	Uniform for new partnership
Date(s) of Project/Event	Ongoing
Location of Project/Event:	Number/Street: Rundle Road, Rundle Reserve Suburb: Salisbury South, SA Postcode: 5109
How will the Project/Event benefit the residents of the City of Salisbury?	We are piloting a partnership between Little & Senior Athletics
How many individuals will benefit from the Project/Event?	200
% of project/event participants that reside in the City of Salisbury	%
If it is an Event, is it open to the public?	No
How will the Project/Event be promoted?	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 8 of 13

Grant Money Requested	
Amount Requested	\$ 2,000
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Uniform	\$ 2,000
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 2,000
Quote Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>
<i>A detailed, current quote <u>must</u> be provided with the application.</i>	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Project or Event Scope

Provide a description of the proposed project or event:

Salisbury East and Salisbury Amateur Athletics clubs are progressing towards an amalgamation. The first step being a uniform that both clubs will use, including a new name, logo and colours, and we wish to give re-registering athletes a free uniform top to help promote our new project and take some financial strain off parents/members that may have already purchased uniform last season.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

This partnership between the two clubs, will promote athletics in a direction. We are the first in South Australia to do this, and so it is a huge coup for the City of Salisbury and the wider community.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

This partnership has been fully supported by the City of Salisbury Council, South Australian Little Athletics Association and Athletics South Australia.

Attachments

- ☐ There are no attachments relating to Support for the Project or Event.
- ☒ The following documents are attached relating to Support for the Project or Event:
1. *Letter of support from SALAA and ASA*
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

After purchasing new uniform for our existing members, we will then purchase uniform for all of our new members/athletes to purchase.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration	
<p style="color: red; font-weight: bold;">Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
<p>S1 S2</p>	
<input checked="" type="checkbox"/>	I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input checked="" type="checkbox"/>	I acknowledge that the information provided in this application is true and correct.
<input checked="" type="checkbox"/>	I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input checked="" type="checkbox"/>	I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input checked="" type="checkbox"/>	I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>Salisbury East Little Athletics</u> (Group/Organisation)</p>	
<p style="color: red;">Jenni Dansie / President</p> <p style="color: red; font-size: small;">(Name/Position)</p>	<p>and</p> <p style="color: blue;">Simon Moran / Coaching Co-ordinator</p> <p style="color: blue; font-size: small;">(Name/Position)</p>
<p>_____</p> <p style="color: red; font-size: small;">(Signature 1)</p>	<p>_____</p> <p style="color: blue; font-size: small;">(Signature 2)</p>
<p style="color: red;">25 June 2016</p> <p style="color: red; font-size: small;">(Date)</p>	<p style="color: blue;">25 June 2016</p> <p style="color: blue; font-size: small;">(Date)</p>
<p style="color: red; font-size: small;">Contact (phone number):</p> <p style="background-color: black; color: black;">[REDACTED]</p>	<p style="color: blue; font-size: small;">Contact (phone number):</p> <p style="background-color: black; color: black;">[REDACTED]</p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Salisbury East Little Athletics (Group/Organisation)

Jenni Dansie / President
(Name/Position)

and

Simon Moran / Coaching Co-ordinator
(Name/Position)

(Signature 1)

(Signature 2)

(Date)

(Date)

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 13



Dear members of Salisbury East Little Athletics Centre and Salisbury Amateur Athletics Club,

We are proud to be supporting the committees of the Salisbury East Little Athletics Centre and Salisbury Amateur Athletics Club, as they begin processes to work more closely together, towards a One Club.

This is an exciting time for both the centre, club, and the future of Athletics in South Australia, as we look to grow the sport, and develop a seamless pathway that inspires young people to participate, perform, and be engaged in athletics in a fun and inclusive environment, for life.

We look forward to all members of the centre and club being involved in this process, with an initial meeting being held on **Wednesday 22nd June 2016 at 7.00pm** at the **John Harvey Gallery, 12 James Street, Salisbury 5108**.

Kind Regards,

Sue Bowman
Little Athletics SA CEO

Adam Bishop
Athletics SA CEO



Government of South Australia
Office for Recreation and Sport

South Australian
Little Athletics Association
ABN 40 290 914 982

PO Box 146
Torrensville Plaza
SA 5031

Tel 08 8352 8133
Fax 08 8352 8155
office@salaa.org.au

salaa.org.au

Athletics South Australia
ABN 14 661 448 453

PO Box 84
Torrensville Plaza
SA 5031

Tel 08 8354 3477
Fax 08 8354 1219
info@athleticssa.com.au

athleticssa.com.au

Quote

Date: 21/07/2016
 Order No: Salisbury East LA
 Page: 1
 Invoice #: 00063554

Invoice To:

Salisbury East Little Athletics Centre
 25 Pulteney Road
 Brahma Lodge SA 5109

Deliver To: Residential

Salisbury East Little Athletics Centre
 25 Pulteney Road
 Brahma Lodge SA 5109
 Att: Jenni Danise

Ship Via:

QTY.	ITEM NO.	DESCRIPTION	PRICE	DISC	UNIT	TOTAL	TAX
100	SUNDRY 2	Sublimated Polo Shirts	\$35.00		EA	\$3,500.00	GST

Terms: C.O.D.

SUB TOTAL

\$3,500.00

TAX

\$350.00

FREIGHT

\$0.00

PAID TO DATE

\$0.00

TOTAL

\$3,850.00

Salisbury East Little Athletics Centre
Committee
ordinary meeting
13/7/16



SELAC Committee 13/7/16

Open 7.35 pm

Present - Jenni Dansie, Paula Warnes, Tim Warnes, Simon Moran, Michael Fraser, Terry Gibbons, Jenni Plunket-Jones, Andrew Wallas

Apologies - Vanessa Potter, Luke Hall, Shelly Howard, Leonie Fraser, Zofia Gibbons.

Minutes of last meeting

- [REDACTED]

Email and Other Approvals since last meeting

- [REDACTED]

Secretary's Report

[REDACTED]

Treasurer's report

[REDACTED]

Portfolio

[REDACTED]

General Business

New Committee Member

- [REDACTED]

SALAA Fee Structure/SELAC Registration Fees

[REDACTED]

SELAC Committee 13/7/16

[REDACTED]

Cross Country 2016

[REDACTED]

Cross Country 2016

[REDACTED]

Carisbrook classic

[REDACTED]

SELAC Committee 13/7/16

[REDACTED]

City to Bay workshop

- [REDACTED]

- Salisbury council has grants available up to \$2000

Jenni request committee consent to apply for a Community Grant through the city of Salisbury

All present were in favour of Jenni placing application.

[REDACTED]

Tiny Tot Program

[REDACTED]

Projects

- [REDACTED]

Close 8.45pm

Next meeting August 10th

SELAC Committee 13/7/16

Action Sheet

Date Added	Action	Responsible	Due	Notes
[REDACTED]	[REDACTED]	[REDACTED]		
[REDACTED]	[REDACTED]			
[REDACTED]	[REDACTED]			
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]		[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]		

[REDACTED]
[REDACTED]
[REDACTED]

Competitions and events at the club season 16/17

[REDACTED]
[REDACTED]

SELAC Committee 13/7/16



SELAC Committee 13/7/16

Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for- profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Salisbury East Little Athletics Centre	
Address:	Rundle Road, Rundle Reserve	
Suburb:	Salisbury South SA	Postcode: 5109
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mrs Jenni Dansie	
Title (your role with the group/organisation):	President	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	[REDACTED]	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Jenni Dansie	
Title (role with the group/organisation):	President	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	President, Secretary, Treasurer & Coaching Co-Ordinator	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A5335	
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:		
f) Purpose:		
g) Other (please specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Salisbury East Little Athletics Centre</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: [REDACTED] Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Sue Bowman</i>	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 8 4 4 9 5 8 0 1 6 8 3 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>(enter '0' dollar amounts below)</i>
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	
Organisation's contribution:	
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	
EXPENSES <i>(specify the proposed expense budget by item:)</i>	\$ AMOUNT
Uniform	\$ 3,850
TOTAL (including GST):	\$ 3,850

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input type="checkbox"/> Event <input checked="" type="checkbox"/> Project <input type="checkbox"/> Ongoing <input checked="" type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Uniform for new name</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>Ongoing</i>
Total cost of Project/Event	<i>\$ 3,850</i>
Amount of Community Grant Funding Requested	<i>\$ 2,000</i>
Is there any other information that you may feel is relevant to your application?	
<input type="checkbox"/> There are no relevant attachments.	<input type="checkbox"/> There are relevant attachments and the following documents are attached: 1. 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	Salisbury East Little Athletics Centre
Group/Organisation Description	Little athletics club
Group/Organisation Registered Address	Number/Street: Rundle Road, Rundle Reserve Suburb: Salisbury South, SA Postcode: 5109
Is the Club Incorporated?	Yes
Number of Members	200
% of Membership that reside in the City of Salisbury	75 %
Project/Event Details	
Project/Event Name	Uniform
Project/Event Summary	Uniform for new partnership
Date(s) of Project/Event	Ongoing
Location of Project/Event:	Number/Street: Rundle Road, Rundle Reserve Suburb: Salisbury South, SA Postcode: 5109
How will the Project/Event benefit the residents of the City of Salisbury?	We are piloting a partnership between Junior & Senior Athletics
How many individuals will benefit from the Project/Event?	100
% of project/event participants that reside in the City of Salisbury	75 %
If it is an Event, is it open to the public?	No
How will the Project/Event be promoted?	An official opening will be held & athletes will receive new uniform

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Grant Money Requested	
Amount Requested	\$ 2,000
Itemised Breakdown of Costs:	
<i>An itemised breakdown of costs must be provided. Please attach a separate sheet if there is insufficient space.</i>	
Uniform	\$ 3,850
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL (including GST):	\$ 3,850
Quote Attached:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(please refer to the City of Salisbury Guide to completing the Community Grants Program Application Form)</i>
<i>A detailed, current quote <u>must</u> be provided with the application.</i>	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Project or Event Scope

Provide a description of the proposed project or event:

Salisbury East and Salisbury Amateur Athletics clubs are progressing towards an amalgamation. The first step being a uniform that both clubs will use, including a new name, logo and colours, and we wish to give re-registering athletes a free uniform top to help promote our new project and take some financial strain off parents/members that may have already purchased uniform last season.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☐ The following documents are attached relating to the Project or Event Scope:
- 1.
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

This partnership between the two clubs, will open pathways for junior athletes to continue on into "Senior" athletics. We are the first in South Australia to do this, and so it is a huge coup for the City of Salisbury and the wider community.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

This partnership has been fully supported by the City of Salisbury Council, South Australian Little Athletics Association and Athletics South Australia.

Attachments

- ☐ There are no attachments relating to Support for the Project or Event.
- ☒ The following documents are attached relating to Support for the Project or Event:
1. *Letter of support from SALAA and ASA*
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

After supplying new uniform for our re-registering members, we will then obtain uniform for all of our new members/athletes to purchase.

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☐ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☐ I acknowledge that the information provided in this application is true and correct.
- ☒ ☐ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☐ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☐ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Salisbury East Little Athletics (Group/Organisation)

Jenni Dansie / President
(Name/Position)

and

Simon Moran / Coaching Co-ordinator
(Name/Position)

(Signature 1)

(Signature 2)

25 June 2016
(Date)

25 June 2016
(Date)

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 13



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 13 of 13

ITEM	7.2.7
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	23/2016: Providence Chick [World Harvest Christian Centre Inc.] - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Providence Chick [World Harvest Christian Centre Inc.] Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
 - a. Grant No. 23/2016: Providence Chick [World Harvest Christian Centre Inc.] be awarded the amount of **\$2,500.00** to assist with the purchase of catering for the 2016 Providence Conference use as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 23/2016: Providence Chick [World Harvest Christian Centre Inc.] - Application
2. 23/2016: Providence Chick [World Harvest Christian Centre Inc.] - Additional Information

1. BACKGROUND

- 1.1 Providence Chick received \$2,000 Community Grant funding in June 2015 towards the purchase of catering for the 2015 Providence Conference.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT


- 3.1 The Providence Chick Application is auspiced by World Harvest Christian Centre Inc.
- 3.2 The Providence Chick [World Harvest Christian Centre Inc.] Application meets the eligibility criteria for the upper limit Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Providence Chick [World Harvest Christian Centre Inc.] Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION


Officer:	EXECUTIVE GROUP
Date:	02/08/2016



Community Grants Program Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.



City of Salisbury
The Living City

Live it up

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions,
this application is **NOT** eligible for grant funding.*

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Providence Chick	
Address:	61 Baloo St,	
Suburb:	INGLE FARM	Postcode: 5098
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Mr <input type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> sharon coleman	
Title (your role with the group/organisation):	Administrator	
Address:	[REDACTED]	
Phone:	Landline: [REDACTED] Mobile: [REDACTED]	
Email:	providence@lifeatlife.com	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mr <input type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> Karen Vander Veen	
Title (role with the group/organisation):	founder	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	overseen by a board	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:		
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not-for-profits Commission?	Yes <input type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input checked="" type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input type="checkbox"/> (go to question e & f)	No <input checked="" type="checkbox"/>
e) Funding source/s:	Donations, registrations	
f) Purpose:		
g) Other (please specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: Providence Chick	Financial Institution Name: [REDACTED]	
<i>*do not provide account or BSB numbers*</i>	Branch Location: [REDACTED]	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	Heather McMillan	
Referee's Contact Information:	[REDACTED]	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

City of Salisbury
Sport, Recreation and Grants Committee Agenda - 8 August 2016

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	\$ 7280 Registrations.
Organisation's contribution:	\$ -
Income received from other Grants: (list organisation(s) providing Grant funding and their contribution)	\$ -
Income received from sponsors: (list sponsor(s) and their contribution)	\$ -
Donations: (please specify the source, product or service and estimated amount of funding requested)	(\$ 2,000) - individuals and businesses Approx.
Have you sought any other funding for the project: (please specify the source and amount of funding requested)	\$ -
TOTAL (including GST):	\$ 9280 (9280.00) - including estimated donations.
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	time, labour, materials, donations.
EXPENSES (specify the proposed expense budget by item:)	\$ AMOUNT
catering	\$ 7,300.00
Administration	\$ 1350.00
Materials for production	\$ 1300.00
cleaning	\$ 1000.00
Decorations	\$ 1000.00
gifts - give-aways	\$ 1000.00
Elective materials	\$ 500.00
	\$
TOTAL (including GST):	\$ 13,450

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input checked="" type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	2016 Providence conference.
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	wednesday 05 october to friday 07 october 2016.
Total cost of Project/Event	\$ 15,308.00
Amount of Community Grant Funding Requested	\$ 2,000 - \$5,000
Is there any other information that you may feel is relevant to your application?	providence provides the young girls 8-18y in this local community and further abroad with a 3 day conference encourage positive self-esteem, keys to healthy behaviour and encouragement for this generation to look forward to a positive future.
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. fieldhouse catering quote 2.
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input type="checkbox"/>
Education and Training	<input checked="" type="checkbox"/>
Culture / Arts	<input checked="" type="checkbox"/>
Sport / Recreation	<input type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Youth	<input checked="" type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 7 of 13

Project/Event Details		
Previous Community Grants Program Funding		
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	July 2015.	
What amount of Grant funding was provided:	\$ 2,000.00	
When was the previous Grant acquitted (month & year):	October 2015.	
Group/Organisation Information		
Group/Organisation Name	Providence Chick	
Group/Organisation Description	Girls conference - Aged 8-18+ years	
Group/Organisation Registered Address	Number/Street: 61 Baloo St Suburb: Ingle Farm Postcode: 5098	
Is the Club Incorporated?	Yes	
Number of Members	6	
% of Membership that reside in the City of Salisbury	90%	
Project/Event Details		
Project/Event Name	2016 Providence Conference	
Project/Event Summary	3 day conference - Giving keys to equip young girls	
Date(s) of Project/Event	Wed 5/10/16 - Fri 7/10/16.	
Location of Project/Event:	Number/Street: 61 Baloo St Suburb: Ingle Farm Postcode: 5098	
How will the Project/Event benefit the residents of the City of Salisbury?	This conference equips young girls with confidence and hope towards the future. It is extremely needed in a time when social media and influences are not always positive.	
How many individuals will benefit from the Project/Event?	over 200 young girls aged 8-18	
% of project/event participants that reside in the City of Salisbury	80%	
If it is an Event, is it open to the public?	Yes	
How will the Project/Event be promoted?	Registration forms, Posters, schools, churches, community organisations	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 9 of 13

Project or Event Scope

Provide a description of the proposed project or event:

Providence Conference is a conference to strengthen young girls aged 8-18 years to know their value and to gain confidence and skills to overcome life's challenges. Providence conference goes for 3 nights and 2 days and is full of surprises, treats and gifts. Our experienced speakers share with the registrants how they can grasp their potential and change their lives so that they can change their world.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☒ The following documents are attached relating to the Project or Event Scope:
1. 2015 Registration Form
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

Young adolescent girls aged 8-18 years within the Salisbury community and beyond to as far as cooperated are encouraged and equipped because of the Providence Conference. Providence is targeting and being advertised in Salisbury local schools, churches and youth organisations.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 10 of 13

Support for the Project or Event
<p><i>Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:</i> <i>(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.</i></p> <p>Temple Christian college, Para lowie. Tyndale Christian School, Salisbury East. Life, Ingle Farm Individual registrants from Salisbury council area and neighbouring council areas of Tea Tree Gully, Enfield, Elizabeth, Munnabarra, Gawler. Providence also has registrants from South Australian country towns, Cooberpedy, Balaklava, Port Pirie, Bordertown, South East Kingston.</p> <p>Attachments</p> <p><input type="checkbox"/> There are no attachments relating to Support for the Project or Event.</p> <p><input checked="" type="checkbox"/> The following documents are attached relating to Support for the Project or Event:</p> <ol style="list-style-type: none"> 1. Letter of commendation - Rod Klimichuk (Temple Christian College) 2. Letter of commendation - Tony Zappia (Para lowie) 3. the formakin
Project or Event Management
<p><u>Ongoing Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed into the future:</i> <i>(outline how you will ensure sustainability and achieve outcomes for the project or activity)</i></p> <p><u>One-off Projects or Events</u></p> <p><i>Describe how the proposed project or event will be managed:</i> <i>(outline how you will achieve outcomes for the project or activity)</i></p> <p>see attached "Sponsorship proposal" for additional information about Providence.</p>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 11 of 13

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that I am authorised to make this application on behalf of the Organisation.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that the information provided in this application is true and correct.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
<input type="checkbox"/>	<input checked="" type="checkbox"/> I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.
<p>On behalf of <u>Providence Chick</u> (Group/Organisation)</p>	
<p><u>Karen Vanderbeek Providence and</u> (Name/Position)</p>	<p><u>Sharon Coleman / Administrator</u> (Name/Position)</p>
<p><u>[Signature]</u> (Signature 1)</p>	<p><u>[Signature]</u> (Signature 2)</p>
<p><u>14/7/16</u> (Date)</p>	<p><u>14/7/16</u> (Date)</p>
<p>Contact (phone number):</p>	<p>Contact (phone number): [REDACTED]</p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your application will not be submitted for consideration until contact and verification has occurred, **no exception.**

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input checked="" type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

Providence chick.

(Group/Organisation)

sharon coteman / Administrator

(Name/Position)

[Signature]

(Signature)

14/7/16

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13





Beyond Wonder

Venue: LIFE
61 Baloo Street
INGLE FARM

Email:
providence@lifeatlife.com

Contact: 8262 6475
0403 859 513

Website:
www.providencechick.com

register and pay by credit card online go to <http://www.trybooking.com/HOAE> or fill out Providence registration Form, Medical Information and Photo Consent, attach and send to below address via person, mail or email.

LIFE
PO Box 52

5:30pm	Registrations	6:30pm	Session 3
6:45pm	Doors Open	8:30pm	Supper
7:00pm	Opening Night	9:00pm	Pick up
8:30pm	Supper		
9:00pm	Pick up		

Thursday 01 Oct

9:00am	Doors Open	09:00am	Doors Open
09:30am	Session 2	09:30am	Session 4
11:30am	Morning Tea	11:30am	Morning Tea
12:15pm	Electives	12:15pm	Electives
1:30pm	Lunch	1:30pm	Lunch
2:30pm	Panel	2:30pm	Fun! Fun! Fun!
		5:30pm	Tea
		6:30pm	Session 5
		8:30pm	Supper

Friday 02 Oct

09:00am	Doors Open
09:30am	Session 4
11:30am	Morning Tea
12:15pm	Electives
1:30pm	Lunch
2:30pm	Fun! Fun! Fun!
5:30pm	Tea
6:30pm	Session 5
8:30pm	Supper



Temple Christian College

*Pursuing excellence
for the glory of God*

To Whomever It May Concern,

Each time we have run Providence for girls and Impact for boys at Temple Christian College, I have seen a difference in the students that have been a part of it. The six areas that are covered in these courses are vital to teenage development and growth. These six areas include respect, self-preservation, health and fitness/eating, etiquette, choices and bullying/harassment.

All of these are issues teenagers face. They need to have the opportunity to hear the advice these courses give, to help them deal with any issues they face and to give them hope and direction in their lives. The challenge for our young people today is that so often they lack hope and turn to negative areas to try to find fulfilment and meaning in life. Providence/Impact goes a long way to address these issues and give teenagers hope in whatever circumstances they find themselves in.

Karen has been a part of our student mentor team at Temple Christian College for approximately two years, as well as a valued parent with both her girls graduating from Temple Christian College. She has conducted Providence/Impact seminars at our campus on a number of occasions. Her input has always been valued and her passion and desire is to see students develop and grow into mature men and women who are responsible citizens in our community.

As a Principal I have always appreciated Karen's input into the school personally and through Providence and Impact. I endorse and recommend both of these courses to anyone who is considering running them.

Rod Klimionok
Campus Principal
Bethany Campus

Mile End Campus
2 Henley Beach Rd, Mile End
S A 5031
Ph: 08 8405 0900
Fax: 08 8234 1052

Bethany Campus
17 Countess Street, Paralowie
S A 5108
Ph: 08 8256 9600
Fax: 08 8283 3854

CRICOS PN: 01179J



Ref:PLS

TONY ZAPPIA MP
FEDERAL MEMBER FOR MAKIN



PARLIAMENT OF AUSTRALIA

Parliament House, Canberra, P.O. Box 61 02 6277 4147
REDFERN, South Australia 5001
Tel: +61 08 8265 9100 Fax: +61 08 8265 9900
P.O. Box 775, Melbourne, Vic 3002
Email: tony.zappia@parliament.gov.au

24 February 2012

SUPPORT LETTER

To whom this may concern

I write in support of the Providence Program run by Karen Van Der Veen from the World Harvest Christian Centre at Ingle Farm.

I have known Karen for several years and I have been aware of the Providence Program since it began.

I have also attended several Providence events over the years and I know that the program is very much dependent on community fundraising.

The Program seeks to support young women in making responsible lifestyle choices, particularly in their adolescent years and has a special focus on young women already facing serious social issues.

The effectiveness of the program lies in Karen's ability, because of her own life experiences, to understand, communicate with and win the confidence of young people.

As a community representative and a parent I am very familiar with the pressures and issues confronted by today's youth and the subsequent costs to both the individual and to society when things go wrong.

I am also aware of the difference that the Providence Program can make to a young person's life.

For that reason I highly commend the Providence Program to you as a program that can change a young person's life for the better.

Yours sincerely

Tony Zappia MP
Federal Member for Makin



Sponsorship Proposal

Providence



Providence



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Promotional Program.....	6
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What is Providence?

Providence is a not-for-profit organization that was established in 2005. The vision of Providence is to provide support and encouragement to adolescent girls. This organisation can do this by teaching girls to live confidently, helping them to understand their value and equip them with life skills.

Providence is described by young women as fearless, courageous and inherently beautiful. Providence seeks to challenge the boundaries and cultural norms set by today's society and ultimately, see young women grow up knowing that they can change not only their own lives, but also the community in which they live.

This organization showcases the power of women who build each other up and emphasizes the importance of establishing key values into young women.



Elements of Providence

CONFERENCE

Providence conferences are more than an annual conference; they are conferences dedicated to empowering, inspiring and enabling young women between the ages of 8-18 years to capture and harness their true potential.

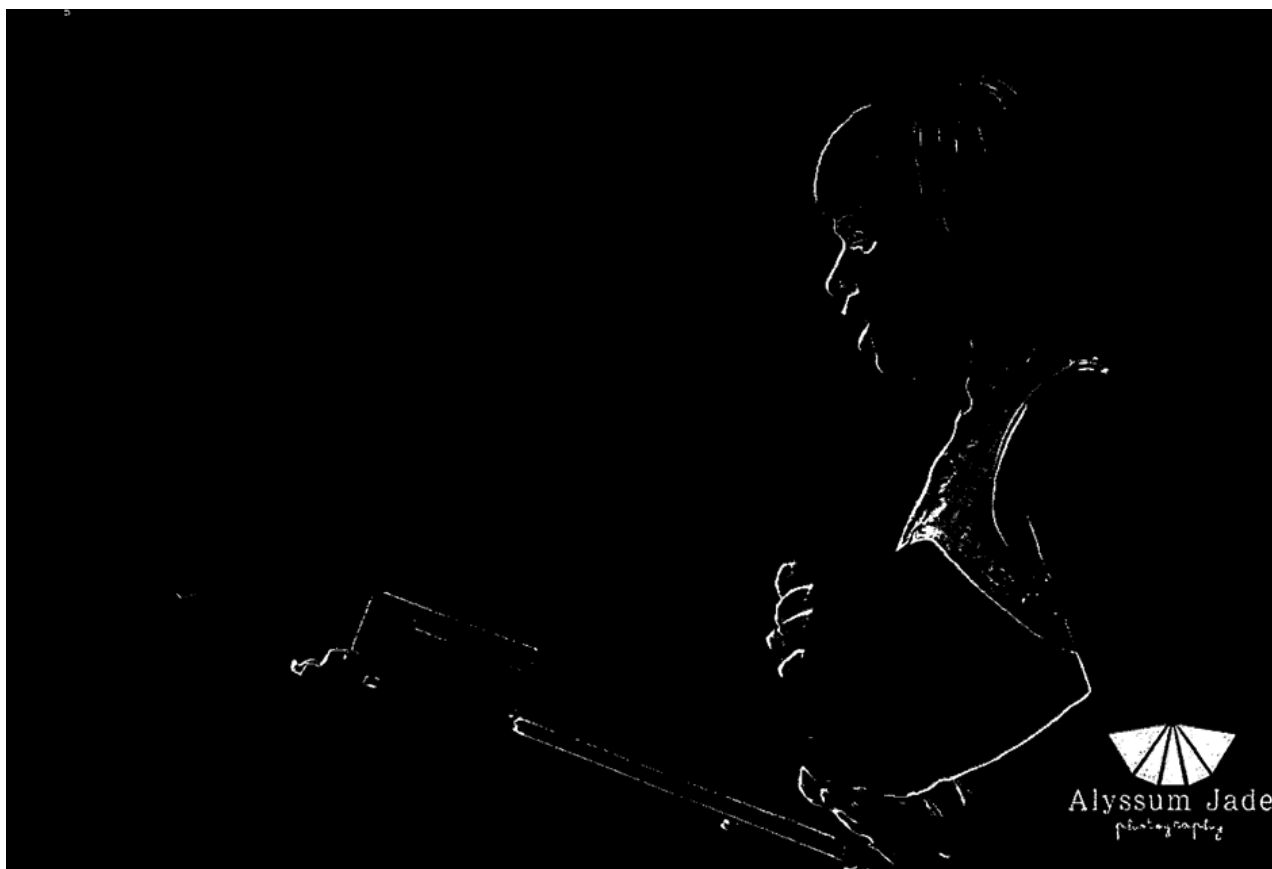
A Providence Conference goes for three nights and two days and it is full of surprises, treats and gifts. Our experienced speakers share keys for girls to grasp their potential and change their lives, so that they can change their world. Each year, Providence Conference highlights a particular theme and focuses on the designated theme for the duration of the conference. Geared at reflecting the conference theme to the girls, and positioning them to understand the concept behind the theme, the Front of House Décor and the location of the conference is utilised to create and solidify the ideas that will be presented

SCHOOLS

Providence Schools Program is an 8 week course with the aim to impart to young girls to discover their personal identity in a positive way. This programme is designed to empower them to challenge their negative mindsets and become equipped to make enriched decisions for their lives.

COUNSELLING

Another side to Providence is the counselling department, in which young girls are assisted to overcome eating disorders, self-harming and sexual abuse. The Providence Team counsels approximately 15 girls per month, strengthening girls to overcome life's challenges.



Behind Providence

Karen Vander Veen is the founder of this not-for-profit organisation with a worthwhile objective to influence teenage girls, called "Providence". She believes there is a growing need within adolescent girls to live with confidence, to understand their value and to learn life skills that will enable them to reach their greatest potential in their walk of life.

She personally experienced setbacks during her childhood and teenage years and understands if it wasn't for the help of others and the solutions that she learnt later in life, she would not be able to contribute to the lives of young girls to find the hope that is available to them.

The vision of Providence is for young girls to understand their true beauty and worth, and to empower them to fulfill their dreams and influence their generation. We believe every girl has amazing potential and a promising future. Providence has four areas of influence that is able to impact young girls between the ages of 12-18 years.



Promotional Program

Providence Conference commits significant resources to producing a high quality annual conference. Bringing in over 180 girls each year, it brings together many young women from a diverse range of backgrounds each with their own story. Providence Conference releases and encourages them to embrace themselves and to connect with other likeminded girls.

Like any event, Providence Conference relies on a strong promotional strategy, continued support from the community and word-of-mouth communication.

COMMUNITY & WORD OF MOUTH

The exceptional success of Providence Conference in the past ten years has resulted in high attendance. There is a definite community interest both from those that attend the conference and the general public, bringing with it valuable word or mouth communication that can only be obtained with the success of the event.



Sponsorship

Sponsor Benefits

You can be a part of this incredible event! By sponsoring Providence Conference, you are not only gaining incredible exposure but you also have the privilege of imparting into the future of young women in South Australia.

Platinum Sponsorship

Commitment: \$5,000

Opportunities: 2

- Logo inclusion on all media and promotional material
- Opportunity to display signage at event
- Invitation for organisation to be VIPs on opening night

Gold Sponsorship

Commitment: \$2,500

Opportunities: 4

- Logo inclusion on all media and promotional material
- Opportunity to display signage at event



Sponsorship

Silver Sponsorship

Commitment: \$1,000
Opportunities: 10

- Logo inclusion on all media and promotional material

Other Sponsorship

Commitment: Giveaways or raffle prizes
Opportunities: Unlimited

There is always opportunity to support Providence in other ways than major sponsorship.

Businesses and organisations may provide a monetary donation (any amount) to assist in giveaways and prizes. You may also choose to donate items or products for giveaways at Providence Conference.

In return we will provide an opportunity for promotional material to be displayed during Providence Conference.



So what are you waiting for?

Providence Conference would like to thank you for taking the time to consider this sponsorship proposal for Providence.

To ensure you obtain full benefit and exposure opportunities associated with sponsoring Providence we encourage you to make your sponsorship commitment no later than 01 September, 2016.

If you would like further information regarding Providence Conference, or to discuss sponsorship opportunities further, please



Karen Vander Veen | Providence Founder | [REDACTED]

Sharon Coleman | Providence Administrator | [REDACTED]

providence@lifeatlife.com

Budget 2015					
	Income	ACTUAL		Expenses	ACTUAL
Registrations 90 x 38.37	3453.30	6409.80	Registrations 12-18+		
Registrations 20x 30 (discount)	600.00	979.37	Registrations 8-11+		
Registrations 90 x 40.00	3600.00				
Merchandise Sales	3000.00	2753.00			
Canteens Sales	360.00	152.00			
Catering Grant -Salisbury City	2000.00	2000.00			
			Admin		
			Postage	599.55	
			Gifts	200.00	
			Stationery	50.00	830.00 Admin
			Incidentals	500.00	1349.55
			Catering		
			VIP Lounge	200.00	
			Conference Catering	2500.00	
			Disposable Napery	600.00	3300.00 4182.01 Catering
			Props		1100.00 1026.71 Props
			Opening Night		790.00 196.39 Opening Night
			Cleaning		
			Skip Bins	670.00	
			Kings Cleaning	240.00	910.00 625.00 Cleaning
			Breakfast Costs		80.00 33.90 Breakfasts
			Entertainment - meals for guests/volunteers		100.00 56.15 Entertainment
			Merchandise Costs		
			Rings and Bracelets	385.00	
			T-Shirts	2325.00	2710.00 1740.75 Merchandise
			Decorations (Glitter ball, foyer & Alfresco)		1000.00 944.88 Decorations
			Gifts		
			Invited Speakers	200.00	
			Giveaways	600.00	
			Volunteers Gifts	200.00	1000.00 1136.53 Gifts
			Electives/Craft		100.00 108.38 Electives/Craft
			Worship Media		150.00 188.25 Worship/Media
			Canteen Expenses		133.80 125.66 Canteen
			Photographer (absorbed in skip bin amount)		15.00 300.00 Photographer
Total	13013.30	12294.17		12738.35	11494.61
Surplus (Loss)	274.95	799.56			



Prices for delivery

*morning tea \$5.50 per head @200 people
=\$1100 x 1 = \$1100*

*fruit platters \$49.50 each feeds around 30
people = \$49.50 x 4 = \$198.00*

*assorted sandwich platters \$5.00 per head
@120 = \$600*

*assorted baguette platters \$5.50 per head
@120 = \$660*

hot roast meat delivery

*2 meats chicken and beef with potato and
gravy \$10.00 per head @ \$200 = \$2000*

*Baked potato with coleslaw & sour cream
\$5.00 per head @200 = \$1000*

Delivery finger food \$9 per head

*These prices are based on the numbers of
200 people = \$1800*

TOTAL = \$7358.00



Thursday, July 28, 2016

City of Salisbury
12 James Street
Salisbury SA 5108

Dear Community Grants Program,

Thank you for your responding letter requesting additional information in regards to the eligibility of Providence Chick. The Community Grant Application was submitted to the City of Salisbury in July and has been requested for the following by no later than Friday 29 July, 2016:

1. A supporting letter from World Harvest Christian Centre providing eligibility to apply.
2. Application declaration to be completed correctly by Karen Vander Veen.

World Harvest Christian Centre is a legally constituted incorporated organization and takes legal and financial responsibility for any grant monies received from the City of Salisbury on behalf of Providence ABN 84215296657.

Yours sincerely

A handwritten signature in blue ink, appearing to read "Mark Baker", is written over a circular blue stamp.

Pastor Mark Baker
Senior Pastor of LIFE, formerly World Harvest Christian Centre

Encl: 1 x supporting letter from World Harvest Christian Centre
1 x application declaration



Formerly World Harvest Christian Centre | 61 Baloo St INGLE FARM SA 5098 | 08 8262 6475 | ABN 84215296

Application Declaration	
<p><i>Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)</i></p>	
<p>Please read, tick the S1 and S2 boxes and sign:</p>	
S1	S2
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that I am authorised to make this application on behalf of the Organisation.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that the information provided in this application is true and correct.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.	
<p>On behalf of <u>Providence Chick</u> (Group/Organisation)</p>	
<p><u>Karen Vandepan Providence and founder</u> (Name/Position)</p>	<p><u>Sharon Coleman / Administrator</u> (Name/Position)</p>
<p><u>[Signature]</u> (Signature 1)</p>	<p><u>[Signature]</u> (Signature 2)</p>
<p><u>14/7/16</u> (Date)</p>	<p><u>14/7/16</u> (Date)</p>
<p>Contact (phone number): <u>[Redacted]</u></p>	<p>Contact (phone number): <u>[Redacted]</u></p>

Both signatories will be contacted to verify the application - a contact phone number must be provided for each. Your application will not be submitted for consideration until contact and verification has occurred, **no exception.**

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

ITEM	7.2.8
	SPORT, RECREATION AND GRANTS COMMITTEE
DATE	08 August 2016
HEADING	24/2016: Orana Inc. - Community Grants Program Application
AUTHOR	Bronwyn Hatswell, PA to General Manager, Community Development
CITY PLAN LINKS	3.4 Be a proud, accessible and welcoming community.
SUMMARY	The Orana Inc. Application is submitted to the Sport, Recreation and Grants Committee for consideration.

RECOMMENDATION

1. It be noted that, in accordance with delegated powers set out in the endorsed Terms of Reference, the Sport, Recreation and Grants Committee assessed and allocated funding for the August 2016 round of Community Grants as follows:
 - a. Grant No. 24/2016: Orana Inc. be awarded the amount of **\$1,815.00** to assist with the purchase of uniforms for the Para Hills Flyers Bedford Soccer Tournament as outlined in the Community Grant Application.

ATTACHMENTS

This document should be read in conjunction with the following attachments:

1. 24/2016: Orana Inc. - Application

1. BACKGROUND

- 1.1 Orana Inc. has not received prior Community Grants Program funding.

2. CONSULTATION / COMMUNICATION

- 2.1 Internal
 - 2.1.1 GMCD

3. REPORT

- 3.1 The Orana Inc. Application meets the eligibility criteria for the requested Community Grants Program funding.

4. CONCLUSION / PROPOSAL

- 4.1 The Orana Inc. Application is submitted for consideration by the Sport, Recreation and Grants Committee.

CO-ORDINATION

Officer: EXECUTIVE GROUP
Date: 02/08/2016

dwaDD50.txt

From: Amy Young [REDACTED]
Sent: Friday, 15 July 2016 4:29:22 PM
To: City of Salisbury
Subject: Form Returned: Completed Salisbury Community Grant Application - Orana Inc..pdf

Form Returned: Completed Salisbury Community Grant Application - Orana Inc..pdf

The attached file is the filled-out form. Please open it to review the data.

Dear City of Salisbury,

Please find attached completed Community Grant Application for Orana Inc. and required documentation.

If you have any questions or would like any further information please do not hesitate to ask.

Kindest Regards,
Amy

Amy Young I Engagement and Inclusion Coordinator
Orana Incorporated
26 Watson Avenue Netley SA 5037
P 08 8375 2000 D 08 8375 2025 M [REDACTED]
www.oranaonline.com.au

Community Grants Program

Application Form

Applications for Community Grants must be received by the 15th of each month to be assessed by the Sport, Recreation and Grants Committee the following month (i.e. an application received by the 15th of February will be assessed at the March Meeting).

Please ensure you have read and understood the City of Salisbury Community Grants Program Guidelines and Eligibility Criteria document prior to completing an Application.

Application Eligibility Checklist		
Is the Funding For:	Yes	No
• Money already spent?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Salaries (initial or ongoing)? <i>Payment of facilitator or contractor engaged specifically to deliver program / activity under the grant may be considered</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Recurrent administration costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Capital development (e.g. renovations or building changes that will be permanently part of the structure)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Upgrading facilities which belong to Local, State or Commonwealth Governments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Application from Public / Private Schools?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• An organisation trading as a sole trader/individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• A group that is a non-incorporated body and does not have a parent incorporated body or is not endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for- profits Commission?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have previously received funding and NOT fulfilled reporting obligations, including provision of post event evaluation/report and financial acquittal?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
• Groups/organisations that have received Community Grants Program funding from the City of Salisbury within the past twelve (12) months.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If you have answered **YES** to any of these questions, this application is **NOT** eligible for grant funding.*

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Community Grant Application - Page 2 of 13

Applicant Organisation Information		
1. GROUP / ORGANISATION DETAILS		
Name:	Orana Inc.	
Address:	26 Watson Ave	
Suburb:	Netley	Postcode: 5037
2. CONTACT PERSON DETAILS (this is the address that all correspondence will be sent)		
Name:	Ms Amy Young	
Title (your role with the group/organisation):	Engagement and Inclusion Coordinator	
Address:	26 Watson Ave, Netley, 5037	
Phone:	Landline: 08 8375 2025 Mobile: [REDACTED]	
Email:	[REDACTED]	
3. COMMUNITY GRANT RESPONSIBILITY		
Name of Person Responsible for the Grant:	Mrs Tania Potts	
Title (role with the group/organisation):	Fundraising and Grants Coordinator	
4. GROUP / ORGANISATION MANAGEMENT DETAILS		
How is your group/organisation managed:	Board of Management	
Is your organisation:		
a) Incorporated:	Yes <input checked="" type="checkbox"/> (go to question c)	No <input type="checkbox"/> (go to question b)
ASIC Registration Number:	A2002	
b) Operated under a Parent Organisation: <i>(please state which parent organisation you operate under below AND attach a supporting letter from the organisation)</i>	Yes <input type="checkbox"/> (go to question c)	No <input checked="" type="checkbox"/> (go to question c)
Parent Organisation		
Name:		
ASIC Registration Number:		

to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered**

Organisation Information (continued)		
c) Community/Non-Profit:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your organisation endorsed with Deductible Gift Recipient (DGR) status by the Australian Taxation Office or Australian Charities and Not- for-profits Commission?	Yes <input checked="" type="checkbox"/> <i>(evidence must be attached to this application)</i>	No <input type="checkbox"/>
d) Government Funded: <i>(If Yes, please list funding source/s and purpose in part e & f)</i>	Yes <input checked="" type="checkbox"/> (go to question e & f)	No <input type="checkbox"/>
e) Funding source/s:	<i>Federal-Dept. Social Services, State-Dept. Communities Social Inclusion</i>	
f) Purpose:	<i>Federal - Employment services (ADE), State - Accommodation Services</i>	
g) Other (please specify):	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. BANKING INFORMATION		
<i>Your organisation must have its own Bank/Credit Union Account or similar</i>		
Full Account Name: <i>Orana Incorporated</i> <i>*do not provide account or BSB numbers*</i>	Financial Institution Name: <div style="background-color: black; width: 50px; height: 15px;"></div> Branch Location: <div style="background-color: black; width: 70px; height: 15px;"></div>	
6. REFEREE INFORMATION		
<i>Please provide the name and contact details of a referee – preferably someone who can verify the bona fide status of your group/organisation (NOT Members of the Committee)</i>		
Referee's Name:	<i>Lisa Hester</i>	
Referee's Contact Information:	<i>Special Olympics SA State Manager, <div style="background-color: black; width: 80px; height: 15px;"></div></i>	

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 4 of 13

GST Declaration		
I agree upon signing of this document that I will provide Council with the following information in regards to my Australian Business Number and Goods and Services Tax registration status.		
Does your group/organisation have an ABN <i>(If Yes - Please Quote ABN:)</i> 6 0 4 2 6 5 1 6 1 1 4 <i>(If No, the ABN Declaration Form attached must be signed)</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is your group/organisation registered for GST	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<p>NB: GST Registration</p> <p><i>If your group IS registered for GST you are required to provide a Tax Invoice to Council before an approved grant amount can be provided to your organisation. The invoice must clearly state the words TAX INVOICE, Business Name, ABN and the approved grant amount including GST.</i></p>		

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 5 of 13

Project/Event Budget Information	
Will the project or event generate income (e.g. ticket sales, entry fee etc.)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>(enter '0' dollar amounts below)</i>
If Yes, provide details:	
INCOME	\$ AMOUNT
Project or event generated income:	\$ 0
Organisation's contribution:	\$ 0
Income received from other Grants: <i>(list organisation(s) providing Grant funding and their contribution)</i>	\$ 0
Income received from sponsors: <i>(list sponsor(s) and their contribution)</i>	\$ 0
Donations: <i>(please specify the source, product or service and estimated amount of funding requested)</i>	\$ 0
Have you sought any other funding for the project: <i>(please specify the source and amount of funding requested)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TOTAL (including GST):	\$ 0
What resources will you and your group contribute to the project e.g. in-kind donations, labour, time etc.?	<i>In-kind staff and volunteer time to organise team, hold training sessions, and on the day support</i>
EXPENSES <i>(specify the proposed expense budget by item:)</i>	\$ AMOUNT
<i>Team uniform</i>	\$ 1,815
TOTAL (including GST):	\$ 1,815

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Community Grant Application - Page 6 of 13

Summary of Project/Event Information	
Is the funding for: <i>(please tick which is applicable)</i>	<input checked="" type="checkbox"/> Event <input type="checkbox"/> Project <input type="checkbox"/> Ongoing <input type="checkbox"/> New Group
Name of Project/Event Requiring Funding	<i>Para Hills Flyers Soccer Uniform</i>
Date(s) of Project/Event <i>(if ongoing please state "ongoing")</i>	<i>08/10/2016</i>
Total cost of Project/Event	<i>\$ 1,815</i>
Amount of Community Grant Funding Requested	<i>\$ 1,815</i>
Is there any other information that you may feel is relevant to your application?	<i>This cost is for the Salisbury located company, however there is another quote which is less for a company located in Kilburn. Therefore if City of Salisbury chooses to approve the grant, it is at your discretion if you prefer the quote of [REDACTED] Salisbury located business or if you prefer to fund the amount for the [REDACTED] quote.</i>
<input type="checkbox"/> There are no relevant attachments.	<input checked="" type="checkbox"/> There are relevant attachments and the following documents are attached: 1. <i>Comparison of quotes</i> 2. <i>2 x quotes</i>
Which category best describes your project/event? <i>(please check all that apply)</i>	
Health	<input checked="" type="checkbox"/>
Establishment of a new group	<input checked="" type="checkbox"/>
Education and Training	<input type="checkbox"/>
Culture / Arts	<input type="checkbox"/>
Sport / Recreation	<input checked="" type="checkbox"/>
Environment	<input type="checkbox"/>
Disability	<input checked="" type="checkbox"/>
Youth	<input type="checkbox"/>
Crime Prevention	<input type="checkbox"/>
Aged	<input type="checkbox"/>

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Project/Event Details	
Previous Community Grants Program Funding	
Has your Organisation previously received a Community Grant? <i>(If Yes – when, amount granted and what the grant was for:)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(go to Group/Organisation Information)</i>
When was the Grant funding received (month & year):	
What amount of Grant funding was provided:	
When was the previous Grant acquitted (month & year):	
Group/Organisation Information	
Group/Organisation Name	<i>Orana Inc.</i>
Group/Organisation Description	<i>Disability Service Provider</i>
Group/Organisation Registered Address	Number/Street: <i>26 Watson Ave</i> Suburb: <i>Netley</i> Postcode: <i>5037</i>
Is the Club Incorporated?	<i>Yes</i>
Number of Members	<i>73</i>
% of Membership that reside in the City of Salisbury	<i>1 % voting members. 14% of Orana clients live/work in Salisbury</i>
Project/Event Details	
Project/Event Name	<i>Para Hills Flyers Soccer Uniform</i>
Project/Event Summary	<i>Provide uniform for team to compete in soccer competition</i>
Date(s) of Project/Event	<i>8.10.2016</i>
Location of Project/Event:	Number/Street: <i>Bonython Park</i> Suburb: <i>Adelaide</i> Postcode: <i>5000</i>
How will the Project/Event benefit the residents of the City of Salisbury?	<i>Encourage people with a disability to participate in sports</i>
How many individuals will benefit from the Project/Event?	<i>20 players with a disability</i>
% of project/event participants that reside in the City of Salisbury	<i>18 % live, and 100% are employed in City of Salisbury</i>
If it is an Event, is it open to the public?	<i>Yes</i>
How will the Project/Event be promoted?	<i>Internally through Orana services, externally by event organisers</i>

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

*to avoid delays please ensure that your application form is completed in its entirety - **all questions must be answered***

Project or Event Scope

Provide a description of the proposed project or event:

The Phoenix Cup event is an annual soccer competition for people with a disability, the competition is a highly anticipated event each year encouraging people with a disability to participate in sports and share a great team environment.

The competition has been running for a number of years. In 2015, a team representing the Orana Para Hills West Employment Services, called Para Hills Flyers competed for the first time. The team really enjoyed participating in the cup in 2015 and are eagerly awaiting the 2016 competition in October 2016.

The Para Hills Flyers showed great team spirit and in 2015, one of their players received the 'Spirit of the Cup' award for the day as the most spirited player. The team showed great sportsmanship, encourage and supporting one another, as well as encouraging and cheering on other teams.

In 2015 the team pulled together a make-do uniform, however in 2016, Orana would like to support the team players to be proud of their team and achievements and be able to play in a proper soccer uniform, solidifying their unity as a team.

Attachments

- ☐ There are no attachments relating to the Project or Event Scope.
- ☒ The following documents are attached relating to the Project or Event Scope:
1. *Phoenix Cup event flyer*
 - 2.
 - 3.

Benefits and Outcomes of the Project or Event

Provide a description of the benefits and outcomes of the proposed project or event to the residents of the City of Salisbury and/or the wider community:

People with a disability have lower participation rates in sports and recreation opportunities that the general population. Through supporting this project, Orana are not only encouraging people with disability to participate in sports and improve their physical and mental health, it is also an opportunity for community inclusion and for people to participate as active members of their communities. Players are proud to be representing their teams, organisations and local communities.

The Phoenix cup also benefits the wider community by promoting inclusion of people with a disability in the community with spectators encouraged to showcase the skills, abilities and sportsmanship of players with disabilities.

Nationally, Australia is moving towards the NDIS which focuses on providing people with greater choice and control as well as providing a platform for people to participate as valued members of the community. As Orana transitions towards the NIDS, Orana is constantly looking for opportunities to support people to participate and engage with their communities, and believe that this is an opportunity and pathway to encourage and link people in to sporting opportunities within the community.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Support for the Project or Event

Demonstrate how the proposed project or event is supported by residents of the City of Salisbury and/or the wider community:

(include a list of key partners and/or stakeholders, community members and organisations that have been consulted, how and why they support the project or event and any other information that demonstrates support.

The Para Hills Flyers team is supported to participate by Orana staff and friends and families of players. Orana staff volunteer their time to fill the roles of coach, first aid officers, and supporters, both on the day of the event and also in the training sessions organised in the lead up to the event, ensuring that people are supported and encouraged to do their best.

Attachments

- ☒ There are no attachments relating to Support for the Project or Event.
- ☐ The following documents are attached relating to Support for the Project or Event:
- 1.
 - 2.
 - 3.

Project or Event Management

Ongoing Projects or Events

Describe how the proposed project or event will be managed into the future:
(outline how you will ensure sustainability and achieve outcomes for the project or activity)

One-off Projects or Events

Describe how the proposed project or event will be managed:
(outline how you will achieve outcomes for the project or activity)

If successful in the grant application, the different colour options of team uniforms will be presented to the team to chose the style and colours that they want to represent them.
Orana will provide logo information to the chosen supplier to complete the order.
Preparation of the soccer uniform will take between 2-4 weeks.
Then on the event day, the team coach will present the players with their uniform.
Orana will cover the competition in their quarterly newsletter - Oranability, the Orana website and the Orana facebook page. Orana will acknowledge the City of Salisbury for their support of the Orana Para Hills Flyers team.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Application Declaration

Please note that this declaration must be signed by two current senior office holders of the group/organisation (ie President, Secretary, Treasurer)

Please read, tick the S1 and S2 boxes and sign:

S1 S2

- ☒ ☒ I acknowledge that I am authorised to make this application on behalf of the Organisation.
- ☒ ☒ I acknowledge that the information provided in this application is true and correct.
- ☒ ☒ I acknowledge that our Organisation may be required to supply further information prior to consideration of this application by the City of Salisbury Community Grants Program.
- ☒ ☒ I acknowledge that, should this Application be successful in obtaining Community Grant funding, our Organisation must complete the acquittal and reporting requirements as set out in the Acceptance of Community Grant – Form 1 and City of Salisbury Community Grants Program Guidelines and Eligibility Criteria.
- ☒ ☒ I acknowledge that any changes in circumstances with regard to this Application must be notified in writing and the City of Salisbury Community Grants Program may request further information.

On behalf of Orana Inc. (Group/Organisation)

Vicki Cotis / Mng Comm & Branding and
(Name/Position)

Nicholas Mihalaras / Chief Executive Officer
(Name/Position)

(Signature 1)

(Signature 2)

15 July 2016
(Date)

15 July 2016
(Date)

Contact (phone number):

Contact (phone number):

Both signatories will be contacted to verify the application - a contact phone number must be provided for each.
Your Application will **not** be submitted until contact and verification has occurred, **no exception**.

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 12 of 13



Declaration Where No Australian Business Number is Required

I hereby certify that I am not required under the New Taxation System to hold an Australian Business Number (ABN), as I am not carrying out an enterprise under the New Tax System definition.

I am providing my services as:

	Yes	No
A private recreational pursuit or hobby	<input type="checkbox"/>	<input type="checkbox"/>
As an individual without a reasonable expectation of profit or gain	<input type="checkbox"/>	<input type="checkbox"/>

As such the Council is not obliged to withhold 48.5% from payments made to me.

I confirm that the above declaration is valid for all payments made by Council to our organisation. Should the situation change and I am required to hold an Australian Business Number, I will notify Council immediately.

(Group/Organisation)

(Name/Position)

(Signature)

(Date)

to avoid delays please ensure that your application form is completed in its entirety - all questions must be answered

Community Grant Application - Page 13 of 13



SOUTH AUSTRALIA

Associations Incorporation Act 1985
Section 24(5)(b)

Incorporation Number: A2002

**Certified Copy of the Certificate of
Incorporation of an Association**

This is to certify that

ORANA INCORPORATED

was, on and from the twelfth day of December 1958
incorporated under the Associations Incorporation Act 1985.

Given under the seal of the Corporate Affairs Commission at Adelaide on this twelfth
day of September 2013

Commissioner of Corporate Affairs



Certificate



Australian Government
Australian Taxation Office

13 September 2013

Endorsement as a deductible gift recipient

Endorsement as a deductible gift recipient under Subdivision 30-BA of the *Income Tax Assessment Act 1997* is provided as detailed below.

Name	ORANA INCORPORATED
Australian business number	60 426 516 114
Endorsement date of effect	1 July 2000
Provision for gift deductibility	item 1 of the table in section 30-15 of the <i>Income Tax Assessment Act 1997</i>
Item(s) in Subdivision 30-B of the <i>Income Tax Assessment Act 1997</i>	4.1.1 registered public benevolent institution

Your organisation's endorsement as a deductible gift recipient, together with the date or period of effect, is entered in the public register maintained by the Australian Business Registrar at www.abn.business.gov.au

Your organisation must notify the Tax Office in writing if it ceases to be entitled to endorsement.

Chris Jordan
Commissioner of Taxation and
Registrar of the Australian Business Register



Orana Board Members

Orana Executive Team

President and Chairman Elected Director	Mr Bill Filmer, AM	Chief Executive Officer	Mr Nicholas Mihalaras
Vice-President Appointed Director	Mr Norm Harrison	Manager - Sales & Business Development	Mr Jim Driver
Treasurer Appointed Director	Mr Richard Goddard	General Manager Human Services	Ms Lorraine Baker
Secretary and CEO Director	Mr Nicholas Mihalaras	State Manager – Accommodation and Respite Services	
Appointed Director	Andrew Berg	Chief Financial Officer	Sharon Strickland
Elected Director	Ms Val Braendler	Manager – Communications, Branding and Marketing	Ms Vicki Cotis
Appointed Director	Ms Michelle Groves	State Manager – Business Operations	Mr Steve Kirby
Appointed Director	Marta Harbuzinska		
Appointed Director	Mr David Johns		
Appointed Director	Arnie Narayan		

Para Hills Flyers Uniform Quotes									
		(Salisbury company) - 11.7.16				(Kilburn Company) - 11.7.16			
Amount	Item	Cost	GST	per item	Total cost	Cost	GST	per kit	Total cost
20	Shirt (with logo and numbers)	25	2.5	27.5	550				
20	Shorts	20	2	22	440				
20	Socks	9	0.9	9.9	198				
20	Bags (with logo)	27	2.7	29.7	594				
1	Gloves	30	3	33	33	30	3	33	33
		Total Cost			\$1,815.00	Total Cost			\$1,463.00

2: SOCCER KIT QUOTE

For your online enquiry, please see below for your pricing and options, note Goal Keeper Gloves are \$20-\$30

Orana Soccer Kit with Jersey, Shorts and Socks and Numbers and Logo on Jersey (6 colours available see flyer and sizes Junior 8 to XL) \$38+ gst per kit

Orana or Puma Kit with Jersey, Shorts and socks and numbers and logo on jersey (See colours below sizes 8-2XL) \$58+ gst per kit

Kit can be ordered in and have the logos and numbers added in a 2 week maximum timeframe.



VIVA SOCCER KID

INCLUDES:

SOCCER TOP

Wide mesh panel
Contrast Style Collar
40gsm Interlock fabric
Vicking Dry-Fit Fabric

+

SOCCER SHORTS

40gsm Interlock fabric
Vicking Dry-Fit Fabric

+

OUR CLUB LOGO

\$19
INC GST



NIKE Park VI

VENTILATION FOR DOMINATION.

Nike Park VI Football Short-Sleeve Jersey is made with Dri-FIT fabric that wicks away sweat while side mesh panels enhance ventilation on the pitch.

ic helps keep you comfortable.

h side panels allow ability.

• Ribbed crew-neck collar provides an unrestricted fit.

• Swoosh design trademark is embroidered on the right chest.

• Woven Authentic Nike Football jock tag is stitched down on the lower left hem.

100% POLYESTER



010
Black



Back view



302
Pine Green



410
Midnight Navy



412
Light Blue



463
Royal Blue



657
Unit Red



677
Team Red



739
Unit Gold/Black



815
Safety Orange

Nike Park II Knit Shorts

LONG COVERAGE, OPTIMAL COMFORT.

Nike Park II Knit Shorts are made with Dri-FIT fabric for optimal sweat-wicking comfort in a design that features adjustable waistband so your fit is secured for high-speed play.

abric wicks sweat away
in for dry comfort.

is cut close to the body for
performance.

9" (22.8 cm) outseam provides
optimal coverage.

Swoosh design trademark is
embroidered on the left leg.

Elastic waistband with an inter-
contrast-colored drawcord pro-
a personalized fit

100% POLYESTER



010
Black



100
White



302
Pine Green



410
Dark Navy



412
Light Blue



463
Royal Blue



657
Light Red



477



750



815



Nike Park IV Socks

DRI-FIT COMFORT WITH A SNUG, SECURE FIT.

The Nike Park IV Socks feature sweat-wicking fabric for comfort and a supportive compression fit with extra arch support.

<p>• Dri-FIT fabric to wick sweat away and help keep feet dry and comfortable.</p> <p>• Extra arch support for a snug, secure fit.</p>	<p>• Reinforced arch for better support and stability.</p> <p>• Compression fit for support and comfort.</p>	<p>• Reinforced heel and toe for enhanced durability in high-wear areas.</p> <p>• Machine wash.</p>
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DRI-FIT 93% NYLON / 4% COTTON / 2% ACRYLIC / 1% SPANDEX



010
Black



100
White/Black



101
White/Royal Blue



302
Forest Green



410
Midnight Navy



412
University Blue



463
Royal Blue



640
Voltage Red











702070

Color:

Pitch Shortsleeved Shirt

- 01 puma red-white
- 02 puma royal-white
- 03 black-white
- 04 white-black
- 05 power green-white
- 06 new navy-white
- 07 team yellow-black
- 08 team orange-black

Material:

100% Polyester microfibre; Double knit: Pique; 130 g/m²; Pre-heat setting, Based Wicking Finish

Profile:

"The Shirts of legends! Used by the games greatest, worn by you. PUMA Cat brandings to righthand chest and sleeves. PUMA Form Stripe insert sleeve panels. 1x1 Rib sleeve cuffs for fit and comfort. Mesh back panel from comfort and temperature control. Crew Neck. Double Knit Polyester Pique fabric. Cl



Material: 100% Polyester microfibre; Double knit; Pique; 130 g/m²; Pre-heat setting, bio-based Wicking Finish
Profile: The Shorts of legends! Used by the games greatest, worn by you. PUMA Cat branding to left leg. PUMA Form Stripe insert outside leg panels. Mesh gusset panel for superior fit and comfort. Elasticated waistband with drawcords. Double Knit Polyester Pique fabric. Clean, classic and distinctly Football.
Sizes: 128 – 176, XS – XXL
Delivery: Ongoing
R.R.P Youth \$30, Adult \$30

701268 Team Socks

Color:
 01 puma red-white
 02 puma royal-white
 03 black-white
 04 white-black
 06 new navy-white

Material: 70% Polyester 25% Cotton 5% Elastane; Sock knit
Profile: A performance range designed specifically for the professional footballer. The combination of powerful cut lines; engineered fabrics and ergonomic fit ensure the athlete has a competitive edge in the modern game. Knitted PUMA Cat Logo on front; cotton instep; ankle flex insert for better comfort.
Sizes: 1 (13-3), 2 (3-6), 3 (7-9), 4 (10-13)



7.2.8 24/2016: Orana Inc. - Application

z: soccer top quotes

for your order
k at the examples provided below

:cer T-shirt Including x1 logo print large and x1 number on back large
collection.com/products/t121ms \$25+gst each

Shorts \$20+gst each x1 logo only
collection.com/products/st122m

Socks \$9+gst each pair plain stock colours
collection.com/products/categories/activewear/subcategories/Socks

tive Including x1 logo print large and x1 number on back large
w.aussiepacific.com.au/mens-tasman-tee \$25+gst each

Shorts \$20+gst each x1 logo only
w.aussiepacific.com.au/mens/bottoms/mens-sports-shorts

w.gearforlife.com.au/bags-lifestyle-leisure/sports-bags/spliced-zenith-sports-bag/
fe sports bag \$27+gst each including x1 Name and X1 company logo added to bag



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T INFORMATION



Bedford Soccer Tournament

Saturday 8 October, 2016

Bonython Park, Adelaide

A **new** central location in the city, opposite Coca-Cola on Port Road



Bedford™
Changing Lives



Bedford™
Changing Lives

**To register your interest or nominate
a team contact **Juli Roberts****

e jroberts@bedfordgroup.com.au **p** 0434 183 854



Images from 2015 Pheonix Cup







