

2022 Community Bank Warburton & Yarra Junction Grants Program

Application Planning Form

Please note that this is a planning form only - all applications must be submitted through our online platform. [Apply Here](#)

Applicant Information: The following information concerns the organisation that is applying for the grant.

Name of Applicant organisation	
Registered Business Name (if different to above)	
Accepted abbreviation for payments (28 characters max)	
Australian Business Number (ABN)	
Does your organisation have DGR (Deductible gift recipient) status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your organisation a not for profit	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your organisation have TCC (Tax concession charity) status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Registered for GST	Yes <input type="checkbox"/> No <input type="checkbox"/>
Authorised person's full name	

Street Address	
Suburb	
State	Post Code

Postal Address (if different to above)	
Suburb	
State	Post Code

Primary Contact Details (Organisational Head) **Secondary Contact Details**

Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>	Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>
First Name		First Name	
Surname		Surname	
Daytime Phone		Daytime Phone	
Mobile		Mobile	
Email		Email	

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Role in Organisation		Role in Organisation	
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Will you be working with a project partner for this grant request? Yes No

Important Note: A letter of support from your project partner must be included with your application.

If your organisation does not have an ABN or is not eligible for funding in its own right a project partner may assist you with your project and receive the funds.

Project Partner Information

Name of organisation	
Registered Business Name (if different to above)	
Accepted abbreviation for Payments (28 characters max)	
Australian Business Number (ABN)	
Does your organisation have DGR (Deductable gift recipient) status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your organisation a not for profit	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your organisation have TCC (Tax concession charity) status	Yes <input type="checkbox"/> No <input type="checkbox"/>
Registered for GST	Yes <input type="checkbox"/> No <input type="checkbox"/>
Authorised person's full name	

Partner Street Address			
Suburb			
State	Post Code		

Partner Postal Address (if different to above)			
Suburb			
State	Post Code		

Primary Contact Details (Organisational Head)

Secondary Contact Details

Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>	Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>
First Name		First Name	
Surname		Surname	
Daytime Phone		Daytime Phone	

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Mobile		Mobile	
Email		Email	
Role in Organisation		Role in Organisation	
What will the project partner do to add value to your project (50 words)			

Organisation Information

Please provide further information about your organisation and its mission within the community.

What year was your organisation established	
How many paid employees?	
How many volunteers contribute time to your organisation?	
What is your organisation's annual turnover?	\$
Approximately how many people receive services or benefit from your organisation each year?	

Please Note: A copy of your audited financial statements will need to be attached to this application.

What is your organisation's mission statement?

(If you don't have a mission statement, what does your organisation aim to do within the community?)

Project Information

The following information is about the project for your grant request.

Project Title / Name

Project Description - (What do you want the money for? Please describe your project.)

Objectives - Outline the primary objectives of the project and the needs of the community to be targeted.

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Community Members Benefited – Outline who is the community will benefit from the delivery of your project.

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List the main Local Government Authority / Council / Shire the project will be delivered in

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List the main postcode the project will be delivered in

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Will this grant benefit Aboriginal and/or Torres Strait islander communities or individuals?	Yes <input type="checkbox"/> No <input type="checkbox"/> Wider Community <input type="checkbox"/>
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Approximately how many people will benefit from your project? (Eg: 5, 20, 50)	
Age group affected by the application	
Project start date	

** (Project start date should ideally be at least four weeks from today, this ensures that we have enough time to get approval)

Project end date	
Grant Amount Requested	

Measure of Success - If you receive funding, what does project success look like? *Inspire us!*

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Will the project proceed if we cannot fund the requested amount?

Explain how the delivery of the project may be affected by a reduced grant.

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Project Budget - Please provide project budget details, ensuring all applicable fields are completed.

Expenses

Administration Costs	\$	How many hours?		Rate per hour?	\$
Equipment	\$	<i>(Brief description of expense item)</i>			
Materials	\$				
Promotions	\$				
Consumables	\$				
Labour	\$				
Other	\$				
Other	\$				
Other	\$				
Total Expenses	\$				

Income

Other Grants received	\$	<i>(Brief description of who funds received from)</i>			
Other Grants requested	\$				
Other Funding	\$				
Own contribution	\$	<i>(e.g. fundraising)</i>			
In-Kind support	\$	<i>(e.g. Donation of goods /services)</i>			
Other	\$				
Other	\$				
Other	\$				
Total Income	\$				

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Important Note: You must attach a copy of all quotes and supporting documentation with your application.

Additional Questions

Q1.

Will project be ongoing? If so, what is your long-term strategy for sustaining the project after this period?

Q2.

Is Community Bank Warburton & Yarra Junction the sole sponsor of the project or event? If not, which other organisation(s) will be co-sponsoring?

Q3.

How will you promote Community Bank Warburton and Yarra Junction, and acknowledge their support?

Q4.

Do you currently have any financial relationship with Community Bank Warburton or Community Bank Yarra Junction?

Q5.

What does your group / organisation currently do to promote and support the Warburton & Yarra Junction Community Bank? Please provide general details of additional business that has been introduced to the Branch as a result of our community investment in your organisation.

Supporting Documentation Checklist

Please check you have attached the following required supporting evidence.

- Financial statements (audited if available)
- Project partner financial statements – if applicable (audited if available)
- Project quotes

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- Any other relevant information
(e.g. annual reports, promotional materials, letters of support)
- Copy of letter of support from project partner (if applicable)
- Proof of other approved funding or own funds to put towards the project

PLANNING FORM ONLY