



# MALENY COMMUNITY TRUST

## Community Grant Application Form

### Important information

1. This form should be read in conjunction with the Maleny Community Trust's Community Grants information brochure.
2. Applicants should provide detailed information about their proposals to enable the Maleny Community Trust Management Committee (Trust Committee) and Maleny Credit Union (MCU) members to assess proposals and determine which projects will be funded and the level of that funding.
3. For processing purposes the forms must be completed in the format provided. Please limit applications to the information requested. Further information may be requested at a later stage in the assessment process if required.
4. The application must be completed and signed off by your organisation's Treasurer, being the financially responsible person of your group. This person will be held accountable for the spending of these funds under a legally binding contract.
  - Funding will not be provided to a personal account.
  - The contract is to be honoured by both parties.
5. Please note that the information in your application will be disclosed to all members of the Trust Committee and any other group established by the Trust Committee in connection with the assessment of applications. It may also be disclosed to community organisations and agencies whose responsibilities are connected with an aspect of the assessment process.
6. Decisions on funding will be determined by the Trust Committee and the MCU membership at the Maleny Credit Union annual general meeting (AGM).
7. Applications from organisations that have unsatisfactorily acquitted previous Maleny Community Trust grants in accordance with contractual agreements will not be considered.
8. Faxed and emailed applications will not be accepted. Original signatures of the responsible officers in your organisation are required.
9. Applicants that have been short-listed will be required to provide two different A4 sized posters depicting their project by mid September 2008 for display in the Maleny Credit Union foyer and at the MCU AGM.
10. Successful applicants are required to provide the completed and signed acquittal form, proof of expenditure and photographs of the project by 31st March 2009.
11. Any organisations requiring assistance with the application process are welcome to contact the Trust Committee via the Maleny Credit Union.
12. Applicants should send the original completed application form, (keeping a copy for your records), plus supporting material (which might include maps, photographs, max. 4) by 30<sup>th</sup> June, 2008 to:

**Maleny Community Trust Management Committee  
Community Grants Program  
Maleny Credit Union, PO Box 1099, Maleny, QLD 4552**

Or deliver it in person to **Bunya House, 28 Maple Street, Maleny**

1. APPLICANT DETAILS

Name of organisation		
Postal address		
State		Postcode
Street address		
State		Postcode
Name of the Treasurer of your organisation		
Contact person for this project		Position in organisation
Contact phone	Contact fax	Contact email
Legal status of your organisation Eg: statutory body, cooperative, company, incorporated association, other ...		<i>(You may be asked to provide a copy of relevant documentation)</i>
Australian Business Number (ABN)		
Is your organisation registered for GST?	Yes/No	
Is your organisation a registered deductible gift recipient?	Yes/No	
What year was your organisation established?		
Number of members in your organisation		
Does your organisation cater to a particular section of the community? If so, please tick where appropriate.	<input type="checkbox"/> Women <input type="checkbox"/> Men <input type="checkbox"/> Young people <input type="checkbox"/> Older people <input type="checkbox"/> Physically or Mentally Challenged Individuals <input type="checkbox"/> Aboriginal or Torres Strait Islander people <input type="checkbox"/> Low/fixed income people <input type="checkbox"/> Other	

2. SHORT PROJECT TITLE

Provide a short project title that succinctly explains the nature of your project.

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3. PROJECT COST, FUNDING AND TIMEFRAME

- a) Please list the estimated project cost, the amount of MCU Charitable Trust funding sought, other funding sought and project timeline:

Total estimated cost	\$
MCU CT funding sought	\$
Other funding sought	\$
Proposed start date	
Estimated completion date	

- b) If successful, would the MCU Charitable Trust grant be sufficient to complete your project? **Yes / No**
- c) If MCU Charitable Trust could only partly fund your project, would it still be able to proceed? **Yes / No**
- d) What other funding is available for your project? What have you applied for or received? (If the outcome is not yet known, write “unknown” in approved column.)

Name of funding body	Amount sought	Approved
	\$	\$
	\$	\$
	\$	\$
	\$	\$

*Please note, Maleny Community Trust funding may be sought over a number of years for larger, staged projects. Separate applications must be made in each year funding is sought.*

4. ATTACHMENT – PROJECT DESCRIPTION

When you submit this application it must be accompanied by a document which concisely describes the project and the target group. There are no strict guidelines as to what form this document should take but it should include the following:

- a. The rationale for the project (including its objectives)
- b. The expected outcomes for the project
- c. Who will benefit from the project
- d. Other groups involved in or affected by the project, and whether they have been consulted
- e. Who will manage the project
- f. How the project will be conducted
- g. A detailed project budget, including enough information to demonstrate how budget figures were determined
- h. The project timeframe
- i. Confirmation that your organisation will account for the grant expenditure and follow the acquittal process provided

5. CERTIFICATION

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

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

**Name** .....

Signature...../...../2008

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

**Name** .....

Signature...../...../2008