2025 Small Project Grant Application - Round 2

* indicates a required field

Welcome to Hume City Council's online funding application for the 2025 Small Project Grant Round 2

Small Project Grants are one year grants with funding available up to \$5,000. You can only submit ONE application, please select your category carefully. Before completing this application you must read:

- 2025 Annual Community Grants Guidelines
- SmartyGrants Help Guide for Applicants

Please have all your supporting documents ready such as

- Bank Statement
- Certificate of Incorporation
- Current Certificate of Public Liability Insurance
- Income and Expenditure Statement
- Quotes for items you intend to purchase

Regularly save your application by clicking the 'Save Progress' button which appears at the top of your screen.

File Upload allows applicants to upload one or more file attachments in their application. The recommended size of a file must be no bigger than 5mb.

INCOMPLETE APPLICATIONS AND/OR APPLICATIONS NOT SUBMITTED BY THE CLOSING DATE CANNOT BE CONSIDERED.

Do you need help or assistance?

If you experience any difficulties with your online application please contact the Community Grants Officer on 9205 2749 or email communitygrants@hume.vic.gov.au

Eligibility Checklist

Applicants must:

- Discuss their proposal with a Council Officer prior to submission
- Be an incorporated not-for-profit community group or organisation
- Have no outstanding debts with Hume City Council
- Proven ability to manage small to medium scale projects
- Run the activity or project from a location within Hume and/or show that it will substantially benefit residents of Hume City
- Have satisfactorily acquitted previous funding received by Hume City Council

- Give a detailed Project Plan
- Applicants will also need to provide detailed plans for how the project is to be made fully sustainable after Council stops funding

IF A DISCUSSION WITH THE APPROPRIATE COUNCIL OFFICER DOES NOT TAKE PLACE, THE APPLICATION WILL BE DEEMED INELIGIBLE.

I confirm that the organisation meets the eligibility requirements
☐ Yes☐ No - Do NOT apply as you will not be considered
Stop. You have answered NO to the above you are NOT ELIGIBLE for this grant.
If you would like further information please contact us on 03 9205 2749 or email communitygrants@hume.vic.gov.au
Officer Discussion
Name of Council Officer you discussed your project with (see Community Grants Website) *
Date discussion took place - IF A DISCUSSION WITH THE APPROPRIATE COUNCIL OFFICER DOES NOT TAKE PLACE, THE APPLICATION WILL BE DEEMED INELIGIBLE. *
Must be a date.
Applicant Details
* indicates a required field
Application Contact Details
Your Name *
Title First Name Last Name
This is your name
Your Position *
Your Phone Number *
Must be an Australian phone number

Your Email *
Must be an email address.
Group/Organisation Name * Organisation Name
Please do not put in individual name it must be Group/Organisation's name
Organisation's Address * Address
Organisation's Phone Number *
Must be an Australian phone number.
Organisation's Email *
Must be an email address.
Organisation's Website
Must be a URL.
Are you, or a member of your immediate family, a staff member (or Councillor) at Hume City Council? * O Yes No
Please give the name of Hume City Council staff member
Taxation details etc
Are you registered for GST? *
Does your organisation have an ABN? *

Council is required to withhold 46.5% of any grant funds issued if you do not provide one of the following: $\frac{1}{2} \int_{-\infty}^{\infty} \frac{1}{2} \left(\frac{1}{2} \int_{-\infty}^{$

Form Preview

- A valid Australian Business Number (ABN) Or
- A completed Statement by a Supplier Form.

This form can be obtained from the Australian Taxation Office website:

Statement by Supplier form

The completed form is to be included in this application.

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register			
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			
ATO Charity Type	More information		
ACNC Registration			
Tax Concessions			
Main business location			
Must be an ABN.			

You have answered No to the previous question

If your organisation does not have an ABN you will need to supply a Statement By Supplier. These are available to for download here

Please attach a Statement By Supplier *
Attach a file:

If your organisation is unincorporated it must have an auspice agency. You will need their financial and taxation details.

If you want to know more about Auspicing please click here https://www.nfplaw.org.au/auspicing

My organisation	is	Incorporated	k
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Form Preview

	1	
Incorporation number *		
Please attach your Certif Attach a file:	ficate of Incorporation *	
Auspice details		
You have answered No to the	ne previous question regardin	g Incorporation.
	rporated must be auspiced by vidence of this arrangement.	y an incorporated not-for-profit
If this application is succ	essful, funds will be paid	to the Auspice organisation.
Auspice Organisation Na Organisation Name	me *	
3		
Asserted Companies than AD	AL #	
Auspice Organisation AB	N *	
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Address for Auspice Organisation *

Address

Address Line 1, Suburb/Town, State/Province, Pos	tcode, and Country are required.
Phone Number for Auspice Organisation) *
Must be an Australian phone number.	
Email contact for Auspice Organisation	*
Must be an email address.	
Website for Auspice Organisation	
Must be a URL.	
Bank Account for Auspice Organisation Account Name	*
BSB Number Account Number	
Must be a valid Australian bank account format.	
Income Sources	
How does your organisation raise incom ☐ Membership fees ☐ Attendance fees ☐ Hume Grants ☐ Other Grants Other	ne? * I Sponsorship General fundraising
Please tick any support you currently re ☐ Hume Community Annual Grant ☐ Council room/facility hire in-kind or at community rate	ceive from Hume City Council * Hume Events grants Other Hume grants program
☐ Other Hume in-kind support☐ Hume Community Year-Round Grant	□ None □ Other:
Project Information	
* indicates a required field	
Project Overview	
Project Title *	

Must be no more than 15 words. For example "Connecting to Craig choir for disadvantaged youth"	gieburn, a program for recent arriv	als" or "Hume Angels - a hip hop
What is your project? Tell funding will be spent. *	us about your idea, what yo	u will do, and how Hume
	ea. Please include who, what, whe y to describe your project, if your a	
Start Date *		
Must be a date and no earlier tha	n 1/1/2025.	
End Date *		
Must be a date and no later than	31/12/2025.	
WHO		
Briefly describe your organ	nisation, what you do and w	hy *
Word count: Must be no more than 100 words What is your purpose? Do you ha	ve lots of members? How long hav	re you been servicing Hume?
Select the most relevant co ☐ Advocacy	ategory that best describes First Nations People, Country and culture	your organisation * □ Safety
☐ Anti-racism☐ Arts and Culture	☐ Health and wellbeing ☐ Learning and skill development	☐ Seniors☐ Social inclusion
 □ Climate change action □ Community event □ Cultural groups □ Environment and sustainability 	□ LGBTIQA+ □ Men □ Multicultural groups □ People with disabilities	□ Sport and exercise□ Volunteering□ Women□ Young people (0-24)
☐ Families and Children	☐ Refugees and newly arrive migrants	d□ Other:
☐ Family violence	•	
How many volunteers do y	ou have? *	

Must be a number. If you don't have any volunteer	rs, please put 0	
Where will your project to All of the Hume area Attwood Bulla Broadmeadows Campbellfield Clarkefield Coolaroo Craigieburn Dallas	ake place? * Diggers Rest Gladstone Park Greenvale Jacana Kalkallo Meadow Heights Melbourne Airport Mickleham Oaklands Junction	 □ Roxburgh Park □ Somerton □ Sunbury □ Tullamarine □ Westmeadows □ Yuroke □ Fawkner □ Keilor □ Wildwood
_	ts will participate in your	project? *
Must be a number. WHY		
Address? How was this ic	ds.	the problem you are trying to
Word count: Must be no more than 150 work	ds.	
Does your project reduce	e barriers to participation.	If yes, how, and for whom? *
	stop people joining in, or create al safety, physical access, lack o	inequalities in how they can join. For facilities etc.
What		
* indicates a required field		
Project implementation of	overview - what will you do	o, how will you resource it? *

Must be no more than 150 words.	
What is your capacity (resourcing) and capability (skills) to	deliver this project? *

Activities

Tell us about the activities you will undertake during your project. List one per row.

Activity	End date	Notes
One per row. Add more rows if you want to list additional activities.	Leave blank if date is unknown or not relevant. Must be a date.	

Outcomes

Please tell us about the outcomes you expect from your project. Outcomes are the changes you expect to occur for the people who take part in your project (or may indirectly participate) When writing your Outcomes, think about how will it affect their:

- Skills, knowledge, confidence, aspiration, motivation
- Actions, behaviours, change in policy
- Social, financial, environmental, physical conditions

Write at least one outcome you expect from this project, and then align them with the outcomes we (Council) want to know about.

Your outcomes	Which of our outcomes will your project align to?	How does your intended outcome link to our outcomes?
Please be brief. One per row.	If multiple options apply pick the most relevant. No more than 1 choice may be selected.	

Measurement and Evaluation

This section is about how you will measure your project against the Council outcomes you have chosen above.

You must choose at least one measurement (one for each Outcome you've chosen) but you can choose more if you want.

If you want two measurements under one Outcome, you will need to choose one per line.

Depending what you choose to measure across the length of your grant, you may need to ask your participants some questions. It is up to you how you collect the information but if your application is successful, we will provide you with survey templates.

You will be asked about these again in your End of Funding report.

Measurement	Target	Notes
Which of our measures will you track? You will be required to report on your progress. No more than 1 choice may be selected.	ldentify an estimated total for your project. Must be a number.	

Risk Analysis

Please provide analysis of your project's key delivery risks and how you will mitigate them.

You will be required to provide a risk commentary in your end of fund report.

More information on risks can be found here

Identify your major project risks	How will you mitigate them?	

Budget

Hume Grant amount sought *

\$

Must be a dollar amount and no more than 5000.

What is the total financial support you are requesting in this application?

Other Project Income

Please list any other income other than Hume Council grant funds that would contribute to the project. You MUST contribute cash or in kind that equates to half the value of the grant request. If you ask for \$5,000, you must show a contribution of at least \$2,500

Example: Fundraising \$1500 Memberships \$120 Philanthropic Grant \$2500 Cash or In-kind \$1000 (from my organisation)

Income Source		Is this funding confirmed?	In kind?
	Must be a dollar amount.		
	\$		
	\$		

Form Preview

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Expenses - Hume Project Grant Funding

Please list the items and amounts for how you intend to spend **Hume Council grant funding only**.

Example: Training \$600,

Hall Hire \$1200,

Facilitator \$200,

In-kind - Volunteer \$40 per hour

This section must total the Hume Grant Amount Sought amount above.

Expense description	Amount\$
	\$
	\$
	\$

Expenses - other project costs

Please outline other project costs that will be incurred (other than Hume Council grant funding).

Remember: if you have included volunteer hours in-kind in your income you must account for them in your expenses.

Expense description	Amount \$	In kind?
Mark N/A if not applicable	Mark "0" if not applicable	
	\$	
	\$	
	\$	

Budget Totals

The below totals are calculated from figures you have entered above. The balance calculation is to check that your budget balances e.g:

Income - Expenditure = Balance

IMPORTANT: The balance must equal 0 or you will not be able to submit. If your balances are not Zero please check your figures above.

Income Total Hume Grant	Expenditure Total Hume Grant Expenses	Balance (Must be Zero) Hume Grant Balance	
\$	\$	\$	
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	
Total Other Income	Total Other Expenses	Other Expenses Balance	

\$	\$	\$
This number/amount is	This number/amount is	This number/amount is
calculated.	calculated.	calculated.
Total Project Income	Total Project Expenses	Total Project Balance
\$	\$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.
Will the project go ahead	if you do not get the full	amount requested from Hume?
*	you do not get and tun	
Outline how your project term impacts) *	would proceed with redu	ced funding (and describe long-
term impacts/		
Word count:		
Must be no more than 50 words	5.	
Arts and Culture - em	ployment information	
Var. have indicated you arm	our Drainet is related to Arts	and Cultura. One of Humala sime
		and Culture. One of Hume's aims prove the economic participation of
How many artists/creativ	es will be paid as part of	this project?
Must be a number.		
Other documentation		
Bank Account *		
Account Name		
BSB Number Account N	umber	
Must be a valid Australian bank	account format.	
Please attach proof of yo Attach a file:	ur bank account number	*
Please attach your latest	Profit and Loss Report *	
Attach a file:		

Form Preview

This is NOT a Bank Statement. A profit and loss statement (P&L), or income and expenditure statement, is a financial report that provides a summary of an organisation's revenues, expenses, and profits/losses over a given period of time. The P&L statement shows a company's ability to generate income and manage expenses. Read more here https://bit.ly/39SeDPg

Please attach Public Liability Insurance (PLI) Certificate of Currency *

Attach a file:
Must be for a minimum of \$10 million. Read more about PLI here https://www.nfplaw.org.au/insurance
Other documentation - Please supply any other relevant documentation i.e. quotes, project plans etc that may help Assessors Attach a file:
Referees
* indicates a required field
Supply the name of at least one Referee Organisation that can provide information about your organisation.
NOTE: Councillors and Council Officers cannot be listed as Referees as this could be perceived as a conflict of interest.
Referee One
Referee 1 * O Individual Organisation Organisation Name
Title First Name Last Name
Referee 1 Position *
Referee 1 Primary Phone Number *
Must be an Australian phone number.
Referee 1 Primary Email *
Must be an email address.

Privacy Statement and Declaration

* indicates a required field

Privacy Statement

Council is collecting this personal information for the purpose of assessing applications for the 2025 Small Project Grant. The information will be used for administrative purposes and will not be disclosed to any other party except as required by law. If you fail to provide this information, Council may not be able to process your application. You may access this information by contacting Council on 9205 2200.

Declaration

In submitting this funding application I declare that I am aware of the following terms and conditions and certify that:

- 1.I am authorised by the Applicant/Auspice to act on behalf of the Applicant/Auspice to submit this application.
- 2.All information given to Council in relation to the grant and application is true and correct, whether that information is given through this application or in any other way.
- 3. The person/s named as the Contact Person in this application has consented to be named as the contact for the Applicant/Auspice and has the authority to provide any information that may be required by Council in relation to this application.
- 4.We acknowledge that our organisation's name will be listed publicly.
- 5.If a grant is awarded we (The Applicant/Auspice) will agree to the terms and conditions outlined in Hume City Council's Funding Agreement.
- 6.We (The Applicant/Auspice) understand that: If we do not act in accordance with this Agreement we may not be eligible for any further grants from Hume City Council.

I have read and agree to the above Terr O Yes	ns and Conditions *
Responsible Person 1 *	
Name of person authorised to sign the Community	Grant Funding Agreement
Responsible Person 1 Position *	
Responsible Person 2 *	
Responsible Person 2 Position *	

Submitting your application

To submit your application be sure to click on the '**Submit**' button which appears on the last page of the application.

You will not be able to submit your application unless you have completed all the compulsory questions.

After submitting your application you will receive a confirmation email. If you do not receive a confirmation email please contact us on 9205 2749 or email communitygrants@hume.vic.gov.au.

Mailing List

Mailing List			
_	e added to our mailing nd opportunities that		
Feedback on the	process		
	complete this applicat / □ Ok □ Difficult □		
Comments			
	ompleting this form? son helped me	· I used Al (for exampl	e ChatGPT)