

# COMMUNITY DEVELOPMENT FUNDING

APPLICATION FORM 2025 - 2026



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### **COMMUNITY DEVELOPMENT FUNDING**

### APPLICATION FORM 2025 - 2026

The City of Albany's Community Development Funding aims to increase community wellbeing, resilience and connection by enabling local initiatives that bring people together, and create a strong thriving community.

APPLICANT DETAILS Before you start, please contoidea.	act the Community Development Team on 6820 3023 to discuss your project
Date of discussion:	
Officer spoken to:	
Organisation name:	
Contact person:	
Postal address: This is the address that the City of Albany will send hardcopy documents to i.e. Funding Agreements	
Telephone:	
Email:	
Is the applicant (tick one box only):	an organisation individual
Note: individuals must be ausp details below.	oiced by an incorporated organisation. Please complete the auspicing body

## COMMUNITY DEVELOPMENT FUNDING APPLICATION FORM SYN REF: NF24177875 / CR.SPO.82

ORGANISATION DETAILS	
Yes (date of incorporation)	d? copy of your Certificate of Incorporation if your application is successful) spicing organisation details below)
	mation about your organisation (or auspicing le what the organisation does, its client or service base, tc.
If the applicant is an indiv	idual, or a non-incorporated group, please complete the
Auspicing organisation's name:	
Contact person:	
Postal Address: This is the address that the City of Albany will send hardcopy documents to i.e. Funding Agreements	
Telephone:	
Email:	

ALL APPLICANTS TO COMP	PLETE THE FOLLOWING:
Is the applicant or auspicing orgo	anisation covered by public liability insurance?:
Yes (please state level of cov	rer and expiry date)
No	
PROJECT DETAILS	
Project title:	
Project summary: (No more than 50 words. The inforthe public where applicable)	rmation supplied here will be used by the City to describe the project to
	T
Project start date:	
Project end date:	
What is the location where your project will take place?	
If you project falls during 2026, how does it align with the Albany 2026 Vision and Misson (Not applicable for supporting the vulnerable applications).	

## Which funding stream and priority does your project/initiative align with? (Please select only one funding stream)

riedse select only one funding stream,

#### Vibrant inclusive and connected neighbourhoods

Increasing community engagement and participation in local events and in community life, in particular with marginalised or disadvantaged population groups.

Connecting people to their local neighbourhood by reducing isolation and building local connections where people live.

Activating under-utilised neighbourhood amenities (eg parks and reserves).

Hosting events, place-making, story-telling and creative expression in local neighbourhoods.

#### OR

#### Strong thriving community groups

Upskilling and increasing the capacity of committee/board members and activity leaders with appropriate training and professional development

Increasing or retaining membership through marketing drives, or redevelopment/development of websites

Increasing the ongoing sustainability of the organisation through innovative projects and initiatives

#### OR

#### Supporting the vulnerable

Improving community health and wellbeing in particular by marginalised or disadvantaged population groups;

Increasing the resilience of those impacted most significantly by COVID-19 restrictions and/or other emergency;

Funding requested: (excluding GST)	
Total project cost: (excluding GST)	

#### Project partners:

(list the organisations, groups, and/or stakeholders involved in delivering your project, and describe their input)

Please describe your project in detail as follows and attach to your application. If
you need more space, you can attach no more than a single A4 page
(single sided, Arial 11 point font, single spaced) Refer to Grants Guidelines for the assessment process.
What are you going to do?
How does your project meet the funding priorities you have identified?
If your project activates under-utilised neighbourhood amenities, please describe in more
detail.
Outline how you have involved community members (target and/or wider community members) in the
design, implementation and delivery of the project.
How will you determine whether your project was successful?

## Which of the following ways are you able to acknowledge the City of Albany's support for the project? (Please tick all that are relevant)

Acknowledgement of City of Albany support (and other sponsors where appropriate) in advertising and media publicity

City of Albany (and other sponsors where appropriate) signage while the project is occurring

Verbal acknowledgement during the project

Formal invitations to City of Albany Mayor and/or Councillors to attend project activities, official functions and hospitality opportunities

The Mayor or Councillors to be invited to present the welcome or opening speech at the commencement and/or launch of the project

#### **BUDGET**

Please outline the total cost of your project. Include any contribution from your organisation, contributions from other funding bodies, and estimated in-kind contributions. In-kind contributions are goods, services, time, expertise, or other non-cash contributions which assist the development, delivery and/or evaluation of the project.

Income Source	Amount \$ (excluding GST)
Request from the City of Albany Please note the City will provide a maximum contribution of \$5,000	\$
Your cash contribution (If any)	\$
Other cash contributions Please provide confirmation of any other funding received	\$
Total cash contributions	\$
In Kind contributions (Estimated value)	\$
Total project income (= total of all cash contributions + in-kind contributions)	\$

#### **PROJECT COST**

Please outline your project's total cost using the table below. Attach written quotes for major budget items for any amount over \$1,000.

Item/s Description	Total item cost (excl GST)	\$ requested from CoA (excl GST)	\$ requested from others (excl GST)	\$ provided by applicant (excl GST)	\$ in kind support contributions
<b>Example</b> Full page advertisement in local newpaper	Example \$800	Example \$400	<b>Example</b> \$0	<b>Example</b> \$400	<b>Example</b> \$0
Total					

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Has your organisc	ation received funding	from the City of Albany in the p	past five years?
Yes	No		
If yes, please prov	vide details		
Ye	ar	Purpose	Amount
APPLICANT DI	ECLARATION		
		en authorised to submit this a ttachments is, to the best of m	
Name:			
Signature:			
Position:			
Date:			
CHECKLIST			
Please ensure you	ı have:		
Read the app	olication guidelines care	efully	
Discussed you	ur proposed event with	the Community Development	Team
Confirmed yo	u or your organisation	meets the eligibility criteria	
Developed a	project that aligns with	n at least one of the funding pr	iorities
Completed A	LL sections of the Appli	cation Form (including project	detail and budget)
Completed A		tes and supporting information	า
•	letters of support, quo	res and supporting information	
Attached any		d any spelling or grammatical e	errors