

Partnership Application Form

Form Preview

Welcome

* indicates a required field

Please read the **Bass Coast Shire Council Partnership Policy** before starting an application [Partnership-Policy-signed.pdf \(basscoast.vic.gov.au\)](#)

It is a **requirement of the Partnership Program** that you speak to either the Advocacy and Partnerships Advisor or your current regular Council contact prior to starting your application.

Your group or organisation **must have submitted an Acquittal Report** for any funds previously supplied by Council or your application may be ineligible.

For advice or assistance contact Council's **Advocacy and Partnerships Advisor** via email partnerships@basscoast.vic.gov.au or telephone 1300 BCOAST(226 278) or (03) 5671 2211.

As you fill out this application form, it is highly recommended that you click the **'save progress' button every 10 minutes** or you may lose your work.

Does your group/organisation have a debt with Council? *

Yes No

Council debts include unpaid rates, enforcement fines, unacquitted grants from other departments within Council. If unsure, it is your responsibility to follow it up.

Have you spoken to the relevant Council officer about your Partnership? *

Yes No -

We recommend that you discuss your project first to ensure it is eligible and that you understand all terms and conditions if the application is successful

If yes, please provide the officer's name *

Tell us about your group / organisation

* indicates a required field

Applicant organisation registered name *

Applicant primary address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

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Applicant email address (consider using your groups email address rather than a personal one) *

We will use this email address for all communication about your application

Describe your group / organisation, who you are and what you do *

Do you have a lease with Council? *

Yes No Unsure

If yes, do you have a current lease / licence with Council? *

Yes No N/A

Select N/A if you group is not in a Council facility

Do you receive any other support from Council such as funding, inkind, facility use, office support etc, outside of this activity? Please describe. *

Being a recipient of Community Grant funding does not apply. Such support could be from any other team within Council, or subsidised use of a Council facility, outside of a lease/license agreement, reduced garbage charges, volunteer insurance etc.

In which Bass Coast Shire Ward (electoral district) is the work of your group or organisation located? *

Island Western Port Bunurong

Other

Please select Other if your organisation is not based in Bass Coast but your proposed partnership is. If unsure which ward you are in, view the ward map at <https://d2n3eh1td3vwdm.cloudfront.net/general-downloads/Publications/Bass-Coast-Electoral-Structure-Map2015.pdf>

Bass Coast Shire Council values the diversity and inclusion of our community. To enhance our understanding of how we can support our partnerships in the future, we have developed the following questions. These questions, guided by the principles of the [Gender Equality Act 2020](#), will inform future partnership decision making.

How many members are in your organisation/group? *

How many members are Bass Coast residents? *

How many of your members identify as women?

Must be a number.

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How many of your members identify as men?

Must be a number.

How many of your members identify as non-binary, transgender or gender diverse?

Must be a number.

How many of your members prefer not to disclose their gender?

Must be a number.

How many of your members identify as Aboriginal or Torres Strait Islander?

Must be a number.

How many of your members identify as a person with a disability?

Must be a number.

What is the legal structure of your group/organisation? *

Is your community group/organisation registered?? *

Yes No

Eg - an Incorporated group will be registered with Consumer Affairs Victoria; a charity will be registered with Australian Charities and Not-for-profits Commission

If yes, please provide Registration / Incorporation number *

Date of registration *

Must be a date.

Does your organisation have an ABN? *

Yes No

If you do not have an ABN, **please submit a completed ATO Statement by Supplier Form*** with the application. The form can be downloaded from [Australian Tax Office](#) website.

* The form must be completed in the name of the group / organisation applying for the grant, **not** the individual completing the application form.

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Completed Statement by Supplier *

Attach a file:

Please attach a current Public Liability Insurance Certificate *

Attach a file:

You are required to provide current insurance cover to support your project

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.

Please attach a current Public Liability Insurance Certificate *

Attach a file:

You are required to provide current insurance cover to support your project

Auspicings

Applications are only accepted from not-for-profit legal entities, for example an incorporated association, cooperative, registered charity.

Groups that do not meet the above are required to be auspicied by a not-for-profit legal entity to make an application.

Is your group / organisation being auspicied for this application? *

Yes No

Auspisor Details

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* indicates a required field

Auspecting Organisation Details

As you have advised your group / organisation is being auspected you are required to complete the following:

- **auspicing Organisation Details** about the incorporated group auspicing this grant application
- **attach a completed Auspicing Agreement.** This form can be found on Council's Advocacy and Partnerships web page at [Advocacy & Partnerships | Bass Coast Shire](#)
- **Public Liability Insurance** - you will need to attach a copy of the auspicing organisation's insurance. Please ensure their insurance will cover your project. If your application is for an event, and the auspicor's public liability insurance does not cover events, you may be able to include the cost of insurance for the activity as part of your grant request.

Auspice organisation registered name *

Auspice contact name *

First Name

Last Name

Position in the organisation *

Auspice email *

Auspice website *

Why have you sought auspicing from this organisation?

Organisation Name

Auspice 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

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| | |
|----------------------------|----------------------------------|
| ABN status | |
| Entity type | |
| Goods & Services Tax (GST) | |
| DGR Endorsed | |
| ATO Charity Type | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |

Please attach a completed Auspice Agreement confirming this arrangement is valid and current *

Attach a file:

Public Liability Insurance. You will need to obtain this from your auspicing organisation. *

Attach a file:

Please provide a copy of the auspicing organisation's public liability insurance and ensure it covers your project

Details of Partnership Agreement

* indicates a required field

Project Title *

Word count:

Must be no more than 15 words.

Please tell us about the activity for which you are seeking Council's support and Partnership. *

Word count:

Must be no more than 60 words.

Provide a brief and articulate description of the activity. What is the purpose of the Partnership?

Can you provide a brief history of the activity? How did it start and what was the inspiration behind it? *

How has Council supported the activity in the past? Eg: financial assistance, in-kind support, promotion? *

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Why is Council's support important for the ongoing success of this activity? *

For example: are you delivering an annual program? Is it to collaborate on events? Do you require funding? Sharing of resources?

Please describe how the community will benefit from your activity and does it address a community need? *

For example - does your activity target social isolation, community connectivity, informing community etc

What is your group doing to promote the inclusion of all individuals? When planning this activity, have you considered ways to ensure everyone feels welcomed and safe? See hint below for examples. *

For example. Gender Audit, Equal Prize Money, Accessible Bathroom Facilities, Staff/Volunteer Rights and Entitlements.

Have you identified specific outcomes or goals for the activity and how do you plan to measure or evaluate the success of these outcomes? *

How will your group / organisation manage the activity *

Who needs to be kept informed of the progress of the activity?

What timelines and/or milestones are associated with your activity? *

Are there any key timelines and/or milestones that you need to observe to manage the activity?

What is your group doing to minimise its impact on the environment? When planning this activity have you considered ways to minimise its impact on the environment? See hint below for examples. *

For example, what steps are being taken to reduce energy and water consumption, and waste production? Have you considered the carbon footprint your project/program will incur and how to reduce it?

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Partnership Responsibilities

What responsibilities will your group / organisation take to support the Partnership activity? *

For example coordinating event delivery, organising information and/or promotion, evaluating the activity once undertaken

What responsibilities do you think Council should have to support the Partnership activity? *

For example support for permit applications, venue waivers, loan of equipment, social media promotion

What responsibilities do you see we both have to support the Partnership activity? *

For example adherence to meeting dates, collaboration to support activity

Partnership Dates

How many years would you like the Partnership to run for? *

Must be a number and no more than 4.

When would you like the Partnership to commence? *

When would you like the Partnership to end? *

Partnership Contact Details

Primary contact name *

First Name

Last Name

We will contact this person for all communication about this application

Primary contact's position in the organisation *

Eg President, Secretary, Grants Officer

Primary Contact Phone Number *

Must be an Australian phone number.

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Primary Contact Email *

Must be an email address.

Secondary Contact Name *

First Name

Last Name

Secondary contact's position in the organisation *

Eg President, Secretary, Grants Officer

Secondary Contact Phone Number *

Must be an Australian phone number.

Secondary Contact Email *

Must be an email address.

Partnership Activity Budget

* indicates a required field

What In-kind support does your group/organisation currently provide to support the activity?

Please describe the inkind support your group/organisation currently undertakes, and will continue to bring, to the partnership. In-kind amounts must be directly related to the partnership and not general operation costs of the group. In-Kind and Voluntary support are contributions to an activity other than money. e.g. voluntary labour or donated materials.

To ensure consistency please calculate in-kind support on the following. Professional services \$50.00 per hour; general labour \$30.00 per hour.

If the activity you are undertaking involves volunteer hours, please provide a monthly breakdown of those hours.

For example: Writers Workshop In-kind supplier: Committee x 2; **Description of goods:** Organising and promoting event x 12hrs each @ \$30.00; over two months **Total** \$1,440.00

| Committee / Volunteer - how many? | What is the task? How many hours? | Total \$ using above rates |
|--|--|-----------------------------------|
|--|--|-----------------------------------|

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Organisation Total Inkind

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This number/amount is calculated.

Does your group / organisation make money from the activity and what expenses do you pay (additional to any funding provided by Council)

Please advise how much income your activity generates, if any, and where it comes from eg ticket sales, food, raffle etc.

Please provide a summary of the expenses that your group pay directly related to the activity. *All amounts should include GST.*

Please also show here if your activity is funded by any other source of funding eg another team within Council, Bendigo Bank grants, State Government Grants etc.

| Source of income | How much? | Expenses paid to support the activity | Cost \$ |
|------------------|-----------|---------------------------------------|---------|
| | | | |
| | | | |
| | | | |
| | | | |

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

What Inkind support are you seeking from Council

Please advise what inkind support you require from Council and for how long.

For example, your activity is on a Saturday 9.00am to 3.00pm and you require 20 traffic bollards to cordon off an area for the event. The requested **Item required** is 20 traffic cones. **Time** will be 8 hours (6 hours for the event and an allowance for set-up and pack-up).

| What is the item / service you require from Council? | Duration / Timing |
|--|-------------------|
| | |
| | |
| | |
| | |

How do you intend to spend Council's funding?

*** A quote must be provided for each item you wish to purchase with Council funding.** *Please note the income and expenditure totals should be the same.*

| Income | Total \$ | Please outline what \$ Amount (approx) you will spend Council's funds on |
|------------------------|----------|--|
| Amount Council funding | | |

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| | | | |
| | | | |

Budget Totals

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

Budget Summary

How much funding are you requesting? *

\$

Check the Partnership Program Guidelines for maximum funding limits and the funding ratio.

Please provide a current bank statement or latest financial report *

Attach a file:

More than one file can be uploaded

If your project expenses aren't itemised in the Expense table above, please attach a brief summary of the proposed project costs

Attach a file:

These costs should generally be representative of actual costs which will be required in the Acquittal Report

Is your activity supported by funding from any other source? *

Yes

No

Eg other funding from within Council, successful grant from another source such as Bendigo Bank, State Government funding

If yes, please provide details

Attach a file:

Eg email confirmation from funding body advising amount. Please ensure this amount is listed in the Income Table above.

Is there anything else you would like to tell us to support your application? *

Word count:

Eg Your bank statement may show a lot of money which is actually committed to a project and not for operational spending - let us know.

Are there any other attachments you want to share in support of your application?

Attach a file:

Eg photos of the activity, letters of support. You can upload more than one file.

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Declaration

* indicates a required field

Partnership Program Terms and Conditions

To formalise a partnership with Bass Coast Shire Council you will be required to consent to the following requirements:

- **Financial Records:** Both parties agree to maintain accurate records of all financial transactions related to the Partnership and make them available upon request.
- **Other Financial Matters:** Documentation of other financial matters engaged by the Partnership – joint grant applications, auspice arrangements, guarantees etc.
- **Intellectual Property:** Any intellectual property developed jointly shall be owned jointly by the parties. Each party shall have the right to use such intellectual property for the purposes of this Agreement.
- **Confidentiality:** Both parties agree to treat any confidential information shared during the Partnership with confidentiality and not disclose it to any third party without prior written consent.
- **Termination:** Either party may terminate this Agreement with 6 months written notice to the other party. Upon termination, both parties agree to return any shared resources or materials and cease using any shared intellectual property.
- **Amendments:** Any amendments or modifications to this Agreement must be made in writing and signed by both parties and updated into our systems accordingly.
- **Not construed as a contract or legally binding agreement:** This Agreement should not be construed or understood as a contract or legally binding agreement outside of the timeframes in the Agreement. Separate contracts, agreements, leases and licenses will be made, if required, to govern different forms of relationships. This Agreement constitutes the entire understanding and agreement between the parties concerning the subject matter hereof and supersedes all prior agreements, negotiations, and discussions between the parties.

Applicant Confirmation

I am authorised by my group/organisation to complete this Partnership form and I agree that:

- The statements made in this application are true
- The activity will be covered by appropriate insurance
- All relevant health and safety standards will be met
- Council does not accept any liability or responsibility for the partnership

If successful I, as the authorised applicant, will ensure that my group/organisation will abide by the following **General Conditions:**

- The group will enter into a partnership agreement with Council
- Any funds connected to the Partnership can only be spent on the activity approved by Council in this form. If Council funds are spent on any other project or activity then Council must be reimbursed an equivalent amount. Similarly, any unspent funds must be reimbursed to the Council
- Any proposed variations of the activity, plans, milestones, budgets or timelines, as outlined in the application form, need to be discussed with the Advocacy and

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Partnerships Advisor in advance. If your variation is agreed to, a variation request in writing must be sent to the Advocacy and Partnerships Advisor before any changes to the activity will be supported.

- An acquittal report must be submitted to Council on an annual basis. This report will vary depending on tier of funding.

Limitations on available funding

I understand that the Partnerships Program is limited by the amount of funds available, and applications will be viewed within the context of Council's overall budget. I am aware that applicants are not guaranteed funding nor can any applicant be guaranteed full funding

Council acknowledgement terms

I understand that successful partnership recipients are required to acknowledge and/ or promote the Partnership formed with Council

I have read the above and confirm my acceptance *

Yes

Do you give permission for your project details to be provided to local media for partnership promotion purposes *

Yes

No

The information provided to local media will relate only to the group name, project title and amount of funding awarded..

Person completing application *

First Name

Last Name

Position in organisation *

Date *

Thank you! Once you click on the **SUBMIT** button your application will be complete. Shortly after you hit the submit button you will receive an email with your application number and a copy of your application attached. Please check the copy of the application carefully and advise us immediately if there are any errors.

If the **SUBMIT** button is not visible, please check the required questions in the application form as you may not have addressed them correctly which will result in the SUBMIT button not becoming active.

[Privacy Statement](#)

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Council collects, holds and shares this Personal Information with Our Community (SmartyGrants) in accordance with the *Privacy and Data Protection Act 2014* (Vic). For further information refer to [Bass Coast Shire Council Privacy](#) and [Our Community Privacy](#).

I understand that, if the application is successful, the name of the applying group/organisation, Partnership summary and amount funded may be made public.

Feedback

We would appreciate your feedback regarding this form and the application process. Your suggestions will be considered for improving Council's Partnerships Program.

How did you find the application process? *

- Very Easy Easy Neither Easy nor Hard Difficult Very Difficult

How did you find out about Partnerships Program *

- Council's website
 Someone in my organisation
 Other group / organisation
 Local newspaper
 Word of mouth

Please provide any other feedback you may have about the online application system or the Partnerships Program