

Attachment - Agenda Report 10.1(A)

A. APPLICANT DETAILS

1. GROUP/ORGANISATION NAME: Gordon Square Childhood Services
 2. POSTAL ADDRESS: 29 Gordon Square
George Town
 3. CONTACT PERSON - Name: Catherine Watson
 Telephone: Home: _____
 Business: 0363822445
 Facsimile: 0363822445
 Email: admin@gordonsquare.com.au

4. Outline the aims and objectives of your group:

Not for profit child care centre

5. What is your legal status as an organisation (tick one):

- Company limited
- Incorporated association
- Statutory body
- Unincorporated group
- GST exemption form enclosed or ABN: _____

6. Details of previous Council grants:

Year	Project Description	\$
2013	Newsletter Grant	?
2012	Newsletter Grant	?
2012	Place of assembly license for market.	94.00

7. How long has your organisation been operating? Thirty One Years

8. Number of active members: 15

9. What sections of the community benefit directly from your organisation?

families, Professionals,

B. DETAILS OF PROJECT:

1. PROJECT TITLE: Christmas Fun Day
2. DESCRIPTION OF PROJECT: Christmas fun day for all the community to enjoy together.
3. PLANNED COMMENCEMENT DATE: 7th December 2013
4. PLANNED COMPLETION DATE: 7th December 2013
5. What need is being met by this project?
Outreach to community, getting the families together to have fun in a safe environment
6. How did you establish this need?
Speaking to those in the community that aren't ~~away~~ aware of the centre being here.
7. a. Estimate how many people will directly benefit from this project? _____
b. If this is an event, how many people do you expect will attend? 200
8. What will be the short and long-term benefits of your project to the George Town community?
Allowing more people to know about the centre and have access to it.
9. DESCRIPTION OF ASSISTANCE SOUGHT FROM COUNCIL:
funding to pay for place of assembly license.
10. AMOUNT APPLIED FOR (IF APPLICABLE): \$94

C. PROJECT MANAGEMENT

1. Who is managing the project? (if there is a steering committee, please list their skills and experience).

Catherine Watson and ~~OWA~~ Kerry'n Bendtsen

2. How will you involve the community in this project?

Inviting all the community to come along to see the centre and join in with the day.

3. How will the project be monitored and evaluated?

Speaking to families, facebook,

4. Will the project be ongoing?

Yes No

If so, how do you propose to maintain funding levels?

5. Describe how you will acknowledge Council's assistance:

ATTACH DETAILS OF YOUR CLEAN-UP PLAN IF YOU ARE REQUESTING ASSISTANCE FOR AN EVENT.

Staff will provide bins and pick up all rubbish around the area after the event.

Are there any further comments you wish to make in regard to this application?

.....
.....
.....
.....

I declare that I am authorised to submit this application on behalf of the applicant group.

Your Name: Catherine Watson

Signature: 

Position Held: Admin Assistant

Date: 16-12-13

BEFORE YOU SEND YOUR APPLICATION TO US PLEASE READ THROUGH THE FOLLOWING POINTS CAREFULLY.

NO FURTHER ACTION WILL BE TAKEN TO PROCESS YOUR APPLICATION IF THE CORRECT INFORMATION HAS NOT BEEN PROVIDED, INCLUDING:

- a. Written evidence of incorporation or of your Group's relationship with another incorporated body;
- b. Most recent audited financial statement;
- c. Written quotations for ALL materials and services;
- d. A copy of your Clean Up Plan (for events);
- e. Written evidence of other community or government grants (where applicable);
- f. All previous grants from Council have been acquitted.

Please forward your application to:

**George Town Council,
P.O. Box 161,
GEORGE TOWN 7253**

The information that Council is collecting from you is personal information required under the *Personal Information Act 2004*. The intended recipients of the information are officers of the George Town Council in order to carry out Council business. Personal information will be used only for the purpose described in the Act, or may be disclosed if authorised by law. The supply of the information by you is not voluntary. If you cannot provide or do not wish to provide the information sought, George Town Council will not be able to process your application. You may make application to access or amend the information held by Council by contacting the relevant Council Officer on 6382 8800.

C. PROJECT BUDGET

Please complete the budget page below to account for all costs for your project. Include income and expense items according to your needs under the headings given. Include a copy of quotations for materials and/or from service providers where applicable.
(Attach extra pages if necessary)

1.

Expected Income (eg Sales, Fees, Other Government Grants, Cash Savings, Donations, etc).	\$
Sales/Market Stalls	\$ 1500
Total Income:	\$ 1500

Expected Costs (eg Wages, Venue Hire, Materials, Postage, Advertising, Equipment Hire, etc)	\$
Consumables	800
Total Costs:	\$ 1500 800
Project Shortfall:	\$ -
Grant Requested:	\$ 94.00

2. Please detail other funding, support or sponsorship you have sought or will seek for this project. Please indicate the source, the amount and if this support is confirmed.

Name of Funding/Sponsorship Body	Amount Requested	Amount Received/Committed

3. Please detail the nature and level of in-kind support your community group is contributing to this project.

The centre is paying for everything for this fun day

D. OTHER