

Narrabri Shire Council 46-48 Maitland Street PO Box 261, Narrabri NSW 2390 P. (02) 6799 6866 F. (02) 6799 6888 E. council@narrabri.nsw.gov.au



NARRABRI SHIRE COUNCIL COMMUNITY GRANTS AND SPONSORSHIP APPLICATION

(pursuant to section 356 of the Local Government Act 1993)

Contact Details

Is your Organisation:

\bigcirc	Not-for-Profit	\bigcirc	Community Organisation/Group	\bigcirc	Registered Sporting Organisation
\bigcirc	Partnership between two (2) or more organisations	\bigcirc	Other		

Organisation Name:

Key Role of your Organisation:

ABN (if applicable): Str

Street Address:

Position in Organisation

Yes

Yes

) No

No

Postal Address (if different to above):

Contact Name

Contact Phone Number

Email Address:

Website Address:

Previous Assistance

- 1. Has your organisation applied for financial assistance from Narrabri Shire Council in the past? (if "No" move to page 2)
- 2. Was your application successful? (if "No" move to page 2)

3. Please specify the type of funding received:

Amount funded:	Date funding was received:
\$	

Project Location: (Must be located within the Narrabri Shire Local Government Area)

Project Timeframe: (Please list the date(s) when the project is scheduled to occur)

Brief Project Description:

Project Outcome/s:

(what the project/program/event expects to achieve; goals of the project/program/event)

Project Output/s:

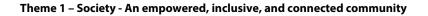
(what will be delivered on completion of the project)

Provide information on how you assessed the need for this project/program/event

Provide information on how you will know the project outcomes have been achieved

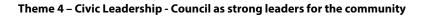
2

Please provide information below on how your project/program/event addresses the themes within Narrabri Shire Council's Community Strategic Plan. You must provide information on at least one (1) of the themes identified below.



Theme 2 – Environment - A sustainable and compatible natural and built environment

Theme 3 – Economy - A strong, diverse, and sustainable economy



Project Partner/s

(If your project/program/ event has more than two (2) partners please attach a list to the back of this application form)

Partner 1:

Organisation Name:		Contact Name:	
Address:			
Phone:	Email:		

Role in Partnership

Contribution to Project/Program/Event

Partner 2:

Organisation Name:	Contact Name:
Address:	

Phone: Email:

Role in Partnership

Contribution to Project/Program/Event

Total Project Cost \$

Council Contribution Requested

\$

Outline GST exclusive budget including confirmed or unconfirmed cash or in-kind contributions. Include clear descriptions of each component of the income and expenditure related to the project. The project income and project expenditure column must be an equal amount.

Please note that that standard value of unskilled volunteer labour is assumed to be \$20 per hour.

Project Income	\$ Project Expenditure	\$
Total	Total	

Application Checklist All relevant sections of the application form have been completed

An insurance Certificate of Currency has been attached to this application



Supporting documentation has been attached to this application (eg: photos, promotional material, quotes)

accept the terms and conditions of the grant as outlined in the grant agreement.

Certification

Lodgment Details

(Must be completed by an authorised officer of the organisation)

Name:		Position:
Signature:		Date
You can lode General Mar		all supporting documents attached) to the
Mail:	Po Box 261, Narrabri NSW 2	390

I certify to the best of my knowledge the statements made within this application are true and

correct, and I understand that if the application for funding is approved, I will be required to

In Person: 46-48 Maitland Street, Narrabri NSW 2390

Email:

council@narrabri.nsw.gov.au