



## Inclusive Community Support Program

### Expressions of Interest Form

Assistance with this grant application may be obtained from the Community Projects Coordinator

Phone: (03) 9401 6666 Mobile: 0498 829 544

Email: [jdunstan@whittleseacc.org.au](mailto:jdunstan@whittleseacc.org.au)

**What is the purpose of your group?**

.....  
.....

**Where does your group meet?**

.....

**What do you think some of the barriers are to Women of CALD backgrounds actively participating in your group?**

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

**How will promote and implement the inclusion of CALD Women within your group? (Describe your project)** .....

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

How will you know you have been successful?

.....

.....

.....

**Details of group or organisation (the Applicant)**

<b>Name of group (or organisation)</b>			
<b>Website (if applicable)</b>			
<b>Incorporation number (if applicable)</b>			
<b>ABN</b>			
<b>Postal address</b>			
		<b>Postcode</b>	
<b>Telephone</b>			
<b>Email</b>			

**Details of contact person for the Applicant**

<b>Name of contact person</b>	
<b>Position in group (if applicable)</b>	
<b>Telephone</b>	
<b>Mobile</b>	
<b>Email</b>	

**Tick the box which best describes the Applicant**

<b>Incorporated association</b>	
<b>Unincorporated group*</b>	
<b>Other</b>	

\*Unincorporated groups must have an auspicing organisation (see next page)

## Section Two. Auspicing organisation

### **Auspicing Agreement**

If the Applicant is not incorporated, or is not a 'not-for-profit' you are required to be auspiced by an **incorporated, not-for-profit organisation.**

The Auspicing Organisation will become responsible for managing the funds if your grant is successful and will be required to enter into and fulfil the Grant Conditions.

For further information please refer to the Grant Guidelines and if you need help finding an organisation to auspice your group please contact us (see page 10).

#### **2.1. Does the Applicant intend to be auspiced?**

- Yes (complete this section)  
 No (move to next section)

#### **2.2. Details of Auspicing organisation**

<b>Name of Auspice organisation</b>			
<b>Overview of auspice organisation <i>what does this organisation do?</i></b>			
<b>Name of contact person</b>			
<b>Position of contact person</b>			
<b>Postal address</b>			<b>Postcode</b>
<b>Telephone</b>			
<b>Email</b>			
<b>Is the auspice organisation not-for-profit?</b>	<b>Yes</b>		<b>No</b>
<b>Outline the type and level of support and commitment you will provide to the group e.g. mentoring, regular contact etc.</b>			
<b>Name of person signing in agreement</b>			
<b>Signature</b>			<b>Date</b>

## Partners

Will leaders within the group, other groups, organisations or people help with this project (other than the auspice organisation)?

	Partner 1	Partner 2
Name of organisation/group		
Name of contact person		
Phone		
Email		
Describe the benefits of working collaboratively with this group or organisation		

## Budget

- A final budget can be developed with support from WCC and the Community Projects Co-ordinator. At this we require a rough estimate.
- How much money are you requesting?

.....

Outline what you will spend the grant money in the table below

Item and what is it for?	Cost
<b>TOTAL</b>	
<b>Total costs covered by <u>this grant</u></b>	

**In-kind contributions include things like your time to promote the group, recruit members, facilitate the group or organise guest speakers. Will you provide any in-kind contributions? If yes, what**

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

**Declaration**

This Declaration is made by the Applicant (an eligible incorporated organisation or local government authority) or an appropriate Auspicing organisation on behalf of the Applicant:

- I declare that I am currently authorised\* to sign legal documents on behalf of the organisation.
- I declare that all the information provided is true and correct.
- I give permission to the Whittlesea Community Connections, if applicable, to contact any persons or organisations in the processing of this application and understand that information may be provided to other agencies, as appropriate.
- If a grant is provided I am aware the Grant Terms and Conditions as outlined the Grant Guidelines will apply to ensure projects are appropriately completed and accountability requirements are met.
- If a grant is provided, I agree to ensure that appropriate insurances are in place (eg. Worker’s compensation, volunteers, professional indemnity, public liability, motor vehicle etc).
- I agree to run the project as stated, and provide to Whittlesea Community Connections, a final report and statement of income and expenditure (signed by the authorised signatory) to demonstrate how the grant funds were utilised by the agreed date.
- I declare that the organisation is financially viable and is able to meet all accountability requirements.

**\*IMPORTANT: The application must be signed by the person legally able to enter into contracts on behalf of the organisation. For incorporated organisations this is generally the Chairperson, President or equivalent officer. For Local Government Authorities this is generally the Chief Executive Officer. The application may be signed by a formally authorised delegate, according to the organisation’s constitution or as bound by law.**

<b>Name of the organisation</b>	
<b>Legally authorised officer</b>	
<b>Position</b>	
<b>Telephone</b>	
<b>Email</b>	

<b>Signature</b>	
<b>Witness name</b>	
<b>Witness signature</b>	
<b>Date</b>	

Please note all formal correspondence will be sent directly to the legally authorised officer.

**[Before you send the expression of interest – please ensure that you have completed the following.](#)**

**Please tick off each item when you have completed or attached it.**

- Completed all questions
- The legally authorised officer has read and completed the Declaration Where an application is being submitted by a not-for-profit community sector organisation that has a sponsoring organisation, please ensure the sponsoring organisation signs the Declaration.
- Attach a copy of your organisation’s Certificate of Incorporation if applicable.

**All expressions of interest must be received by Whittlesea Community Connections by mail or email by 5pm on 22 April 2019 to be considered.**

**[How to submit an application](#)**

Submit your application by:

**Post:** C/o Whittlesea Community Connections  
 Shop 111 Epping Plaza  
 Epping, Vic 3076

**Email: [jdunstan@whittleseacc.org.au](mailto:jdunstan@whittleseacc.org.au)**

*Emailed applications should include a scanned PDF of the declaration page showing the signature of the authorised representative or, if this is not possible, the signed declaration should be posted within five days of the application.*