



2020 SMALL GRANTS FUNDING APPLICATION FORM

The Adelaide White Ribbon Breakfast & Adelaide White Ribbon Night Committees welcome requests for funding up to \$5000 to support projects aimed at the prevention of violence against women.

The project should have an advocacy, educational, prevention or victim / survivor support.

Applicants should be non-government, not-for-profit organisations or individuals, with the target group / audience being primarily non-government.

Aboriginal and Torres Strait Islander, migrant and CALD communities are encouraged to apply.

The Grants Committee is keen to support new initiatives by individuals and community groups who have not previously received funding. However, re-submitted, previously unsuccessful applications will be accepted.

Before you begin your application, please ensure that you have read the Grants Brochure on our website.

<http://adelaidewhiteribbonbreakfast.vpweb.com.au/Grants.html>

DATES TO NOTE:

Applications open: Saturday 5th September 2020 at 9.00am

Applications close: Saturday 3rd October 2020 at 5.00pm

Notification: by Saturday 17th October 2020

Please complete this form and return to:
Adelaide White Ribbon Breakfast Committee,
PO Box 3201 Rundle Mall
ADELAIDE SA 5000

or email to: adelaidewrb@gmail.com

Questions regarding the application are welcomed.

Please email: adelaidewrb@gmail.com

Information about your organisation

1. Name of group/organisation seeking funding:

Website address (if applicable):

ABN (if applicable):

2. Contact information

Address:

Suburb:

Post Code:

Telephone/Mobile:

Email:

3. Eligibility

Yes

No

Are you a not-for-profit organisation?

Is your organisation incorporated?

Is your organisation an endorsed Deductible Gift Recipient?

4. Short description of organisation/s

Information about your Project

1. Name of Project:

2. Please tell us who will manage and/or deliver the project.

Title:

Given name:

Surname:

Position:

Telephone/Mobile:

Email:

Experience in managing this type of project:

3. Nominated representative for correspondence (if different from above)

Title: Given name: Surname:
Position:
Telephone/Mobile: Email:

4. Description of Project:

If you are working with other groups, e.g. schools, or other bodies, please include acknowledgement of their agreement.

5. Targeted group/ audience:

Youth	CALD	ATSI	Victims- survivors
Perpetrators	Whole of Community		Others

If you have ticked 'Others', please provide more details:

6. Category:

Advocacy	Education	Prevention	Victim-Survivor Support
Other	Please provide further details		

7. Region:

Adelaide Metropolitan Area

Northern	Southern	Eastern	Western
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Regional SA – please indicate area

8. Is this a new or existing Project?:

9. Expected commencement date of Project:

Expected completion date of Project:

10. What is the primary purpose of the Project? What are the expected outcomes?

11. Please list full details how you plan to implement your project.

12. How does your project seek to address the issues identified and who do you think will obtain most benefit?

13. How will the project's objectives be evaluated/ measured? :

14. Has your organisation identified any project risks?

Yes No

If yes, what are the risks and how will those risks be managed? (Risks to White Ribbon, AWRBC, your organisation, people attending, media attention and/or political attention.)

15. Do you believe your project will generate media interest or coverage?	Yes	No
If yes, how do you think this will be generated?		
Funding for your Project		
NOTE: Funding will not be provided for administration costs, room hire costs, refreshments, speakers' gifts or take home bags for participants.		
<p>1. Total Project Budget: \$</p> <p>Please provide a summary of items that make up the above figure.</p>		
<p>2. Amount of funding requested from AWRBC: \$</p> <p>Please indicate which items summarised in 1. above this funding will cover.</p> <p>Note: The Grants Committee cannot guarantee full funding to all successful applicants. If a lesser amount is offered, AWRBC will seek to clarify the viability of the project, with reduced funds.</p>		
<p>3. Has your organisation requested/received funding from any other parties in respect to this Project? Who are these other parties?</p>		

Reporting on your project

1. The Grants Committee requires a Report (1-2 A4 pages) within 3 months of the completion of the project. How you will report on the outcomes of your project?

2. AWRBC requires acknowledgement of the grant/funding.

A copy of our logo will be provided. How would you include use of the logo and acknowledgement of the grant in your project?

3. If possible, could a member of the AWRBC participate in or observe the project?

4. Is there anything further you would like the AWRBC to know about this Project?

5. Verification letter from officer of organisation attached

6. Verification of support from other partners/schools/community organisations

7. Please provide referee details:

Name:

Position:

Telephone/Mobile:

Email:

Signature of applicant:.....

Date:

Letterhead of organisation

Date:

DECLARATION

To be signed by Chief Executive of Organisation

I.....of

.....

(organisation name)

as.....(position held)

authorise.....

(name of applicant)

to make this application on behalf of this organisation.

I confirm that all the information provided in or with this application is true.

The applicants understand that the Adelaide White Ribbon Breakfast Committee is under no obligation to make a grant.

Signature:**Date:**.....

PRINT NAME:

Please note: The above signature must be a signed original.
Other versions such as per/pp, or on behalf of, will not be accepted.