Form Preview

Eligibility

* indicates a required field

Before you start your application, please ensure you have read the <u>Guidelines for the</u> <u>Landcare Australia Community Grants Program 2024</u> to ensure your organisation or group is eligible to apply and your project meets the requirements.

Please Note- Sole traders/ individuals and schools (including PnC) are NOT eligible to apply.

Applications close at **5pm Friday 20 September 2024** (late applications will not be accepted).

See the Grant Guidelines for more information.

How the application form works

Saving

The application form **does not autosave**. You will need to press the save button regularly to avoid losing your progress. **You can save your responses and come back to them later**.

Tables

You can add more rows to a table by clicking [+] on the right-hand side of the table, and remove rows (empty or not) by clicking [-].

Word limits

Some text boxes have word limits. You will not be able to submit your application until your response is below the word limit for that question. SmartyGrants will tell you if you've gone over.

Are you applying on behalf of a landcare group or community g	roups across
Australia that embrace the landcare ethos? *	

Yes

O No

Unfortunately, you are not eligible to apply for this grant round.

The Landcare Australia Community Grants program is open to all landcare and community groups across Australia that embrace the landcare ethos, including Landcare, Bushcare, Dunecare, Coastcare and "Friends of" groups Traditional Owners and First Nations organisations, youth environmental groups and networks (ages 18+).

Group Details

* indicates a required field

Organisation Name

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Organisation Name * Organisation Name			
Organisation Primary Address Address			
Organisation Primary Phone N	lumber		
Must be an Australian phone number.			
Organisation Primary Email			
Must be an email address.			
Organisation Primary Website	;]		
Must be a URL.			
Organisation Social Media pag	je		
e.g Facebook or instagram page			
Organisation ABN *			
The ABN provided will be used to check that you have entered the		owing information	. Click Lookup above to
Information from the Australian Busin	ness Register		7
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			

Must be an ABN.

ATO Charity Type

ACNC Registration
Tax Concessions

Main business location

More information

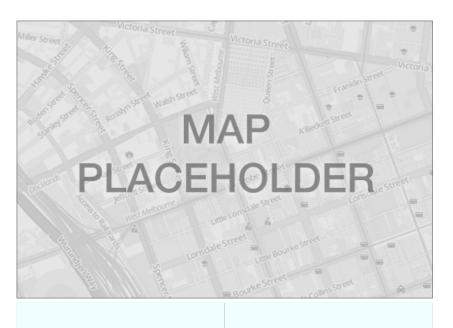
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Tell us about your group, how/when your group formed, membership numbers, and outline some of your regular activities *
Word count: Must be no more than 150 words.
What area type is your group/project located? * Metropolitan Urban Peri-Urban Regional Rural Remote
Primary Contact Details
Primary Contact * Title First Name Last Name
Primary Contact Position
Primary Contact Primary Phone Number * Must be an Australian phone number.
Primary Contact Primary Email *
Must be an email address.
Secondary Contact Details
Secondary Contact * Title First Name Last Name
Secondary Contact Position
Secondary Contact Phone Number *
Must be an Australian phone number.
Secondary Contact Email *

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Must be an email address.
Project Overview
* indicates a required field
Project Title *
Please provide an overview of your proposed project - What do you aim to do / what priority issue will it address for your group, community and/ or the environment? *
Word count: Must be no more than 250 words. Please provide a brief overview of the proposed project.
What activities best describe the focus of your group's application: Approved capital works (e.g. fencing, soil moving, path improvements) Cultural and ecological burns Community events and activities Habitat creation and revegetation plantings Managing fuel load Signage Volunteer recruitment activities Weed and pest animal management and noxious weed control Other:
Project Start Date *
Must be a date and no earlier than 18/10/2024.
Project End Date *
Must be a date and no later than 31/7/2025.
Project Site Location * Address

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Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia If you have more than one site, please select the most relevant.

Please describe the project site: - Location - Site description (e.g. highlighting any areas of environmental/ cultural significance, site history, issues or impacts on the site, topography, adjacent land use, directly fire affected etc.) *

Word count:

Must be no more than 150 words.

Project Site Size (ha) *

Must be a number.

Please approximate the area of your project. If no on-ground works are being undertaken please write zero (0).

Project Details

* indicates a required field

Project Objectives

In the questions below, please describe the project outcomes and why this work needs to be done. Project objectives are what your project is planning to achieve and will be reported on at the completion of your project.

Consider:

- Why it is important?
- What are your objectives for this project?
- How will you achieve the project objectives? (e.g. engaging volunteers, professional/ technical support/advice, collaborating with others, training etc)

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• Who will be involved in this project? (e.g. existing group members, school students, new volunteers, community, council)

Be SMART

- Specific (simple, sensible, significant).
- Measurable (meaningful, motivating).
- Achievable (agreed, attainable).
- Relevant (reasonable, realistic and resourced, results-based).
- Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Desc	ribe the expecte	ed social	and community	engagement	outcomes	of this
proje	ect and how they	will be	achieved: *			

Word count:			

Must be no more than 200 words.

E.g. Increased group capacity/profile through increased on-ground activities, increased community awareness, engaged Traditional Owners, shared knowledge through community days and online social networks such as Landcarer etc..

Describe the expected environmental outcomes of this project and how they will be achieved: *

Maral accuse		

Word count:

Must be no more than 200 words.

E.g. Best practise weed removal (hand/mechanical/most appropriate for area) of 2ha of {name of weeds} of national/local significance by volunteers/contractors to improve native vegetation due to reduced competition with weeds to improve habitat for the state listed threatened species - e.g. grey headed flying fox

In the table below, please list the major outputs that will be undertaken to contribute to achieving your project outcomes.

EXAMPLE:

- Output Option: Plants (# Revegetated or Propagated)
- Output quantity: 500
- Activity description: 'Planting 500 native plants at the project location with members of the local landcare group.
- Expected completion date: 25th July 2025

Please fill in a maximum of 5 activities.

Activity 1

4	Activity Option 1 *	Activity Quantity 1 *	Description of activity & expected	Expected completion date *
			outcome *	

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	Must be a number.		Must be a date.
Activity 2			
Activity Option 2	Activity Quantity 2	Description of activity & expected	d Expected completion date
		outcome	
	Must be a number.		Must be a date.
Activity 3			
Activity Option 3	Activity Quantity 3	Description of activity & expected outcome	d Expected completion date
		outcome	
	Must be a number.		Must be a date.
Activity 4			
Activity Option 4	Activity Quantity 4	Description of activity & expected outcome	d Expected completion date
	Must be a number.		Must be a date.
Activity 5			
Activity Option 5	Activity Quantity 5	Description of activity & expected	d Expected completion date
		outcome	
	Must be a number.		Must be a date.
Engagement and	d Monitoring		
* indicates a required	field		
Who is involved in	n this project?		
	- <u>-</u>		
	se detail their contri	ganisations that will bution (e.g. technica	

Word count:

Must be no more than 200 words.

E.g. Local Council - Site prep; Landcare Group - Project management; Men's Shed - Provide nest boxes

Proposed number of people directly involved in this project: *

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Must be a number.	
Monitoring Maintenance	
Please describe how you plan to monito survival; volunteer involvement, results etc.)? *	
Word count:	
Max 200 words	
Please describe how you will maintain t follow up activities, facilitation of comm	nto the future. (e.g
Word count:	
Max 150 words	

Budget

In the table below, please enter your proposed budget.

- Enter each budget item on a separate line.
- Include the quantity (with units) and rates (price per unit) for each budget item in the description.
- Funding Requested enter the price of the items to be funded.
- **In-Kind Contributions** enter the price of the items that are being funding by external sources, if any.
- If your Group is registered for GST base your budget on GST exclusive pricing.
- If your Group is not registered for GST base your budget on GST inclusive pricing.

To add a funding item, click on the + 'plus' button. To delete a funding item click on the - 'minus' button

Project Budget

Item Description	Funding Requested (ex GST)	GST)
	Must be a dollar amount.	Must be a dollar amount.
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

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Budget Totals

Total Funding Requested (ex GST)	Total In-Kind Contribution (ex GST)	Total Project Cost (ex GST)
This number/amount is calculated. What is the total financial sup you are requesting in this application?	This number/amount is calculated.	This number/amount is calculated.
Supporting Docume	ents/ Declaration	
* indicates a required field		
Supporting Documer	nts	
your application. Photos		nt supporting documents to our group are encouraged, an omote the grant. *
A minimum of 1 file must be a	attached.	
Declaration		
☐ I have read and agreed	on this form is complete and co to the Landcare Australia Grar to the Landcare Australia Priva plicy	nt Terms & Conditions
Feedback/ Survey		
Your responses to the follo	wing questions will not be asse	ssed.
	le in this section may be used to the control of th	by Landcare Australia in the future on, and to help us improve our
Please answer the following	g questions on completion of th	nis application form:
Q1 How many people we	orked on this application? *	
Must be a number		
Must be a number.		
Q2 How many hours did	your group spend on this a	pplication? *
Must be a number.		

Q3 How easy was the application form to use? *

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0	somewhat easy not very easy				
Q4 Do you have any feedback about the application process? *					
	Does your group Yes No Other:	work with the Traditional Owner group	in your area? *		
Q6. Does your group work with, or support any Junior Landcare groups e.g schools, scout groups etc. * O Yes O No					
de O	Is there a landsc liver on? * Yes No	ape scale plan in your region that your g	group is working to		
Ple	ease provide any i	elevant information if you selected Yes	to any of Q5-7		