2027 Kingston Charitable Fund Annual Grant - Application Form
Form Preview

Eligibility

* indicates a required field

Kingston Charitable Fund

Welcome to the 2027 Kingston Charitable Fund Grant Program

The Kingston Charitable Fund aims to support charitable organisations that meet community needs, build stronger and more connected communities and complement Kingston Council's activities in the community.

Applicants: please note

Before completing this application form, you should have read the Kingston Charitable Fund Grant Guidelines available on our website.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is crucial that you complete these questions before any others to ensure this grant is suitable for you.

If you have any questions regarding the eligibility criteria, please contact the Kingston Grants Officers on 1300 653 356 or charitable.fund@kingston.vic.gov.au.

To contact us throughout the application process, please quote the application number below:

Application Number

This field is read only.

Confirmation of Eligibility

Organisations must:

- Have Deductible Gift Recipient (DGR) Item 1
- Have Tax Concession Charity status (TCC)
- Be physically located within the Kingston City Council geographical boundaries or be able to demonstrate significant benefit to the Kingston community
- Be able to demonstrate financial viability
- Provide current public liability insurance with a level of cover appropriate to the activity/ program
- If a Council tenant, be in compliance with all requirements within the tenancy agreement
- Have no overdue grant acquittals and have successfully acquitted previous grants received
- Have no outstanding debts owing to Council, or can demonstrate they have entered into a payment plan

- Have no active breaches against the obligations of Consumer Affairs Victoria, the Australian Not-for-Profit and Charities Commission, or the Australian Securities and Investment Commission, as applicable
- Have not received a grant for the same or similar activity from another Kinston Grants Program grant stream or other Council funding source in the same financial year running July to June
- Demonstrate alignment between the proposed activity and aims of the Kingston Charitable Fund
- Not receive a direct income from gambling activities, undertake or promote gambling
- Submit a complete application, including attachments or other supporting information requested by Council
- Adhere to the Victorian Child Safe Standards (where applicable)

Please select below: *

○ Yes

You must confirm that all statements above are true and correct to proceed.

Contact Details

* indicates a required field

Applicant Details

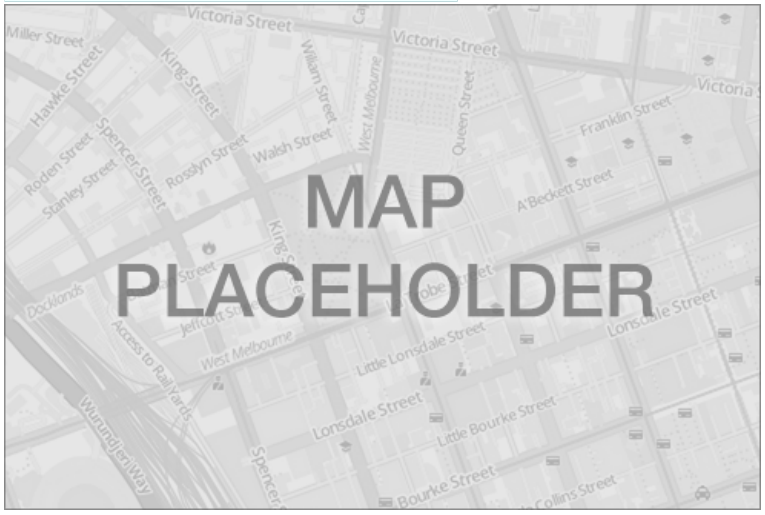
Organisation Name *

Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Organisation primary address

Address



Organisation postal address
Address

May have to enter manually

Organisation primary phone number *

Must be an Australian phone number.

Organisation email address *

Must be an email address.

Organisation website

Must be a URL.

Primary Contact Details

Primary contact *
First Name Last Name

This is the person we will correspond with about this grant.

Position held in organisation *

Phone number *

Must be an Australian phone number.

Email address *

This is the address we will use to correspond with you about this grant.

Organisation Details

* indicates a required field

Does your organisation have Deductible Gift Recipient (DGR) 1 status? *
○ Yes ○ No

Does your organisation have Tax Concession Charity status (TCC) *

○ Yes ○ No

Ineligible

Your response indicates that you are ineligible for the Kingston Charitable Fund grant.

For further information, please contact the Kingston Grants Officers on 1300 653 356 or email charitable.fund@kingston.vic.gov.au

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity Name	
ABN Status	
Entity Type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

What is your organisation's purpose or mission? *

Word count:
Must be no more than 250 words.

What is your organisation's geographical coverage? *

ie: List of suburbs/area

Number of people your organisation assisted during the last financial year *

Of this number, how many are City of Kingston residents *

Type of not-for-profit organisation *

☐ Arts and creative activities
☐ Children and youth
☐ Community interest
☐ Culturally and Linguistically Diverse group (CALD)
☐ Disability service
☐ Educational institution (includes pre-schools, schools, universities & higher education providers)
☐ General not-for-profit (i.e. none of the sub-types listed above)
☐ Financial hardship / emergency relief
☐ Health and wellbeing service
☐ Philanthropic organisation
☐ Religious or faith-based institution
☐ Seniors (over 55)
☐ Sport and recreation
☐ Other:

Please choose the option/s that best applies to your organisation.

What is your organisation's annual revenue? *

○ Less than $50,000
○ $50,000 or more, but less than $250,000
○ $250,000 or more, but less than $1 million
○ $1 million or more, but less than $10 million
○ $10 million or more, but less than $100 million
○ $100 million or more

Your revenue includes grants, donations, and other fundraising activities, fees for services, sale of goods, interest, royalties and in-kind donations that have been included in your accounts as 'revenue'. The Australian Charities and Not-for-profits Commission (ACNC) has more detailed information here: https://www.acnc.gov.au/tools/topic-guides/revenue

Supporting Documents

Please upload the following supporting documents:

Most recent financial statement *
Attach a file:

Full financial statement required (i.e. balance sheet, funds held for purpose etc)

Most recent annual report *
Attach a file:

Documents must comply with your Australian Charities and Not-for-Profits Commission obligations

Current public liability insurance certificate of currency *
Attach a file:

Certificate of incorporation
Attach a file:

If not already provided in the last year

Activity Details

* indicates a required field

Activity title: *

Word count:
Must be no more than 7 words.
Provide a name for your activity to be funded. Your title should be short but descriptive

Anticipated start date *

After May 2027

Anticipated end date *

30 June 2027

Please provide a short summary of your activity *

Word count:
Must be no more than 150 words.
Be descriptive, but succinct. Include a brief summary of who this activity is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and the outcomes you expect

Activity Details - Assessment Criteria

* indicates a required field

The following questions address the grants Assessment Criteria as outlined in the Kingston Charitable Fund 2027 Guidelines.

Community Outcomes

Assessment Criteria:

- Complements City of Kingston activities
- Targets Kingston's disadvantaged communities or improves access
- Encourages a diversity of activities and opportunities available to the community
- Helps to build skills in the community

How does your activity benefit the Kingston community? *

Word count:

Does your activity support access, diversity and inclusion (refer definitions below)? Please provide further detail *

Word count:
Must be no more than 150 words.

Access - Please explain how your activity will give people a chance to join in or take part. How will you address any physical, communication, financial barriers to peoples participation (such as physical, communication, financial, social, cultural, technological, time, educational or psychological barriers).

Diversity - Refers to a mix of various characteristics such as race, culture, gender, abilities, and perspectives within a group or community. Activities that support a variety of populations, such as both Chinese and Italian communities, or Greek communities and People with Disabilities, are considered diverse. An activity cannot be considered diverse if it serves only one population, regardless of whether that population faces disadvantages.

Inclusion - Please explain how your activity will ensure everyone feels welcome, respected, and valued. How will you create an environment where all people, regardless of their differences, can fully participate and have equal opportunities.

Link to Planning

Assessment Criteria:

- States clear aims for the activity
- Shows evidence of planning eg. resources, safety, permits, etc
- Addresses a genuine and identified community need

Why is this activity needed? *

Must be no more than 250 words.
What issue (community need) is your activity addressing? Consider who in the community is affected and why this activity is needed

Who will benefit from the activity? *

☐ Animal welfare groups
☐ Arts and cultural groups
☐ Children (0-12 years)
☐ Culturally and linguistically diverse (CALD) groups
☐ Environmental or sustainability groups
☐ Indigenous communities
☐ LGBTQIA+ community
☐ Families
☐ Men
☐ Older adults (55+ years)
☐ People experiencing homelessness
☐ People with disabilities
☐ Refugees or asylum seekers
☐ Women
☐ Young people (12-25 years)

Select all that apply

How many people will benefit from this activity? *

Must be a number.
Estimate

Of this number, how many are Kingston residents? *

Must be a number.
Estimate

How will you deliver this activity? *

Word count:
Must be no more than 150 words.
Please tell us your plan for delivering the activity (including key deliverables, timeframes, key stakeholders and resources).

Does this activity have community support? In particular, do the beneficiary and/or geographic communities who are affected by this activity support it.? *

○ Yes ○ No

Evidence of community support is highly regarded as activity with community buy-in tend to be more successful

What evidence do you have that this activity has community support? *

Word count:
Must be no more than 50 words.

Please upload letters of support (if available/relevant)
Attach a file:

A maximum of 5 files can be attached

Provide further detail *

Word count:
Must be no more than 50 words.

Resourcing

Assessment Criteria:

- Demonstrates capacity to deliver on the activity and meet conditions of funding
- Seeks, where possible, to identify other sources of financial / in-kind contributions
- Consideration will be given to the level of previous financial assistance
- Demonstrates suitable and efficient use of funds

How do you intend to promote your activity? *

Word count:
Must be no more than 100 words.
How will you engage your audience, and how will you attract different types of people?

Have you done this activity, or something like it, before? Please give details *

Word count:
Must be no more than 100 words.

Please explain the experience, skills and knowledge of the main people who will run this activity *

Word count:
Must be no more than 100 words.
How will their skills make your activity successful?

Upload any additional supporting documentation
Attach a file:

Please list organisational partners (if any) you will work through or with to reach your beneficiaries and/or achieve your outcomes

Partner Name	**Role of Partner**
	Must be no more than 10 words.

Budget

* indicates a required field

Total Amount Requested *

$

What is the total financial support you are requesting in this application?

Total Activity Cost *

$

What is the total budgeted cost (dollars) of your activity?

Your budget should show all the money coming in (income) and going out (expenditure) for this activity.

In the **Income** column, write what funding you will receive, (e.g. Council grant, fundraising night, ticket sales, or sponsorship). In the **Expenditure** column, list your expenses (e.g. venue hire, entertainment, or traffic management).

Use the **Notes** column for any extra information we should know.

Income and Expenditure

Please enter details of all income and expenditure items for your activity

Income Type	Income Amount ($)	Notes
What funding will you use for this activity. If 'Other' please provide explanation in Notes	Must be a whole dollar amount (no cents).	Provide more details. Also use this to provide an explanation for income type 'Other'

Expenditure Description	Expenditure Amount ($)	Notes	Quotes
List all costs required to carry out your activity	Must be a whole dollar amount (no cents).	Provide more details. Also use this to provide an explanation for expenditure type 'Other'	Upload quotes for items to be funded by Kingston Charitable Fund

Budget Totals

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

Income - Expenditure

This amount should equal '0'

If your application was successful but received partial funding, would you still be able to deliver this activity? *

○ Yes
○ No

Briefly summarise how this would impact your delivery *

Word count:
Must be no more than 50 words.

Certification and Feedback

* indicates a required field

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval including but not limited to submitting a report (acquittal) at the conclusion of the funding term.

I understand that the Kingston City Council is subject to the Freedom of Information Act 1982 and if a Freedom of Information request is made, the Kingston City Council will consult with the applicant before any decision is made to release the application or supporting documentation.

I agree * ○ Yes ○ No

Name of authorised person *
First Name Last Name
Must be a senior staff member, board member or appropriately authorised person

Position *
Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *
Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

Privacy Statement

The Kingston City Council is committed to protecting your privacy. The personal information requested on this form is being collected by Kingston City Council for the purpose of grant administration and/or any other directly related purpose. It will not be disclosed to any other external party without your consent, unless required or authorised by law. If the personal information is not collected, please provide details of the organisation and contact details, however if you are applying as an individual, we will need your personal contact details. If you wish to alter any of the personal information you have supplied, please contact the Kingston Grants Officers on 1300 653 356 or email charitable.fund@kingston.vic.gov.au

A full copy of our Privacy Policy may be obtained from our website: www.kingston.vic.gov.au/Contact-Us/Privacy.

Applicant Feedback

You have reached the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

How did you hear about this grant opportunity

- ○ Direct email
- ○ Council website
- ○ Council social media
- ○ Through my local club / group
- ○ Word of mouth
- ○ Other:

Did you find the Guidelines easy to understand?

○ Yes ○ No

Please indicate how you found the online application process:

○ Easy ○ Neutral ○ Difficult

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider

What Happens Next

Thank you for your application!

Once you select submit you will receive confirmation of your application via the email address you registered with. A copy of your application will be attached to this email.

Council may contact you for more information about your application.

All applicants will be advised of the outcome in May 2027, once recommendations are approved by Greater Melbourne Foundation in April 2027.

For further information about the Kingston Charitable Fund Grants Program or to view the Grants Guidelines, please visit: www.kingston.vic.gov.au/charitablefund, or contact the Kingston Grants Officers on 1300 653 356 or charitable.fund@kingston.vic.gov.au

Applicant Demographics

This section is not compulsory

The City of Kingston is committed to making our grants program accessible and inclusive for people of all genders, ethnicities, sexual orientations, abilities, and ages. We invite you (the applicant) to provide your demographic information to help us improve the accessibility of our program.

This information is **not** used to assess your application.

What is your age group?

- ○ Under 18
- ○ 18-25
- ○ 26-35
- ○ 36-45
- ○ 46-55
- ○ 56-65
- ○ 66-75
- ○ 76-85
- ○ 86+
- ○ Prefer not to say

How do you describe your gender?

- ○ Man/Boy
- ○ Woman/Girl
- ○ Non-binary/gender diverse
- ○ Prefer not to say
- ○ Prefer to self-describe (please specify)

Self-description

Do you identify as:

- ☐ Aboriginal and/or Torres Strait Islander
- ☐ Person with disability
- ☐ Culturally and linguistically diverse
- ☐ Part of the the LGBTQIA+ community
- ☐ Prefer not to say

Please specify: