2027-2030 O&P Multicultural & Seniors Grant Application
Form Preview

Eligibility

* indicates a required field

Program

This field is read only.

Application Number

This field is read only.

Welcome to the Kingston Grants Program, Operational & Partnership - Multicultural & Seniors grant stream. This is a three-year grant cycle covering 2027-2030.

All eligible applications will be assessed via the funding formula outlined in the Guidelines.

This application is for three years of funding (2027-2030). To be considered for funding, applications must be submitted by 11:59pm on Sunday 28 February 2027.

This form is structured in sections, covering;

1. Eligibility
2. Contact and organisational details
3. Application questions aligned with the assessment criteria.

There is also a section to provide feedback at the end.

Before completing this form please ensure you;

1. Read the Operational & Partnership Guidelines information
2. Check your eligibility and what Council will and will not fund
3. Have acquitted all previous grants
4. Have paid any outstanding debts to Council (or have evidence of a payment plan)
5. Have prepared the documents to be attached to support your application

If you are unsure at any point, please get in touch with the Kingston Grants Team on 1300 653 356 or community@kingston.vic.gov.au.

Confirmation of Eligibility

Applications must:

- Align with the key directions of the Council & Wellbeing Plan 2025-29.
- Align with the purpose and requirements of this grant stream.
- Include current public liability insurance with an appropriate level of cover and a copy of your Certificate of Currency.
- Be submitted by the due date.

Applicants must:

- Be located in Kingston; or if located outside of Kingston, be able to demonstrate their activity provides a significant benefit to the Kingston community.
- Have no overdue grant acquittal reports or debts with Council.
- Not have received a Kingston Grants Program or Kingston Charitable Fund grant for the same activity within the same financial year.
- Comply with all Council policies, laws (including Child Safe Standards), government directions, and legal agreements, and provide a copy of your Child Safe Standards Policy (if applicable).
- 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.
- Be legally constituted (e.g. incorporated association, company limited by guarantee, Aboriginal Corporation, Statutory Authority, or a Church established by legislation). Evidence of legal status must be provided.
- Be not-for-profit and managed by a volunteer board/committee of management; and provide evidence of your last annual report or AGM minutes complying with Consumer Affairs Victoria, Australian Charities and Not-for-Profits Commission, or Australian Securities and Investments Commission obligations.
- Be financially sustainable and able to operate for the full funding period with support from the grant and provide your organisations latest financial statement complying with Consumer Affairs Victoria, Australian Charities and Not-for-Profits Commission, or Australian Securities and Investments Commission obligations.
- Not receive a direct income from gambling activities, undertake or promote gambling.

Funding will not be provided for:

- The operations of religious or political organisations for activities related to worship, promotion, protest or campaigns.
- Activities that are the core responsibility of State or Federal Governments or schools.
- Gambling-related activities; or the lease / rent of venues with gaming machines (unless no viable alternative exists).
- The lease / rent of venues that are inappropriate for the nature of the activity, owned by the applicant, or outside the geographical boundaries of the City of Kingston.
- Replacement or top-up of discontinued or reduced income.
- Retrospective funding (for activities already completed).
- Fireworks, alcohol or other drugs.
- Trophies, prizes or fundraising items.

To be eligible for funding under this grant stream, applicants must meet all eligibility criteria as outlined in the Kingston Grants Program Guidelines.

I confirm that I have read and understood the eligibility criteria listed in the Kingston Grants Program Guidelines, and that this application meets all eligibility requirements

I agree *

○ Yes

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

Contact Details

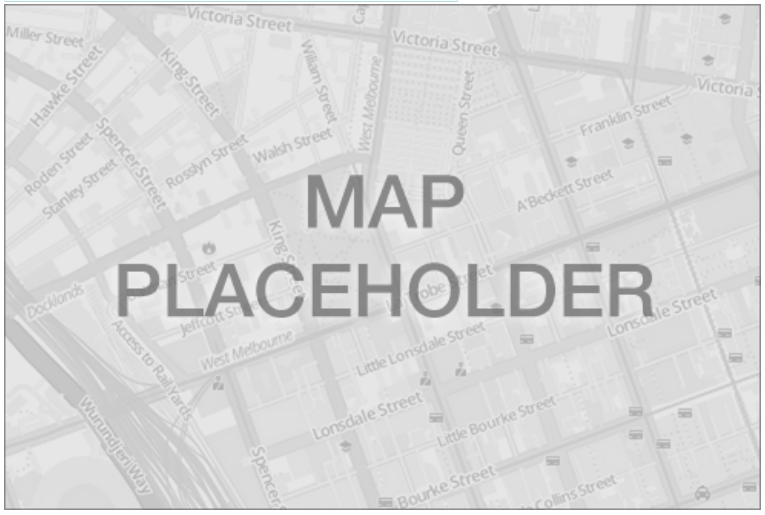
* indicates a required field

Applicant Organisation Details

Organisation or Group Name *
Organisation Name

Please use the same name that is listed in official documentation such as Consumer Affairs, Australian Business Registry, Australian Charities and Not for Profit Commission, Australian Tax Office

Meeting Address
Address



What address does your group or club regularly meet at?

Check the link below to see if you are located in the Kingston municipality Know Your Council | vic.gov.au

Organisation or Group postal address
Address

PO Box or where mail will be collected. If your address does not appear you may enter the details manually

Organisation or Group website

Must be a URL.

Main Contact Details

Primary contact *
First Name Last Name

This is the person we will contact about this grant

Position held in organisation or group *

For example: President, Secretary, Treasurer

Phone number *

Must be an Australian phone number.

Email address *

This is the address we will use to contact about this grant

Secondary Contact Details

Please tell us the name of another Committee member for your group or club

Secondary contact *
First Name Last Name

This person will be contacted if we are unable to reach the primary contact

Secondary contact - position held in organisation or group *

Must be a Committee Member (for example: President, Secretary Treasurer)

Secondary contact - phone number *

Must be an Australian phone number.

Secondary contact - email address *

Must be an email address.

Organisation or Group Details

* indicates a required field

Is your organisation or group incorporated? *
- ○ Yes
- ○ No

Ineligible

Your response indicates that you are ineligible to apply for Kingston's Operational & Partnership, Multicultural & Seniors grant program.

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

Have you previously provided your Incorporation Certificate to the Kingston City Council Grants Team? *

- ○ Yes
- ○ No

What is your organisation or group's incorporation number? *

Incorporated Association or Australian Company Number

Please upload your organisation or group's Certificate of Incorporation *

Attach a file:

Please add your ABN (if applicable)

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 group or club's purpose or mission? *

Word count:

Must be no more than 200 words.

Why have you formed as a group or club? If uploading mission statement, please type 'see below'

Please upload mission statement (if applicable)
Attach a file:

How many active members are in your organisation or group? *

Must be a number.

What number of your members are Kingston residents? *

Must be a number.

Please provide evidence of your Kingston members (eg. a list of your members with their residential postcode) *
Attach a file:

Meeting Frequency

Please list the days of the week and times that you regularly meet with members.

Days of the week	Meeting time	Meeting Frequency	Notes
i.e. Monday	i.e. 12.30pm-2.30pm	How often do you meet?	If 'Other' please provide more information

Please upload the following documentation:

Your organisation or group's Certificate of Currency (Public Liability Insurance) *
Attach a file:

Your organisation or group's list of all committee members *
Attach a file:

Your organisation or group's latest Annual General Meeting minutes *
Attach a file:

Financial Information

What is your organisation or group's current annual income? *

Must be a dollar amount.
For example: membership fees

What is the value of any cash reserves your organisation or group currently holds? *

Savings or funds held for purpose

What plans (if any) do you have for spending your cash reserves? *

If your organisation does not have any cash reserves respond N/A

What is your organisation or group's current annual expenditure? *

Are you able to access other sources of funding? Please provide details *

Upload your organisation or group's most recent financial statement *
Attach a file:

Must be a financial statement (not a bank statement). Must show income, expenditure and savings.

Does your organisation or group receive any direct income from gambling activities? *

- ○ Yes
- ○ No

Applicants that receive any direct income from gambling activities (including gaming machines) are not eligible to apply for funding from the Kingston Grants Program, even if the proposed project is unrelated to gambling.

Ineligible

Your response indicates that you are ineligible to apply for Kingston's Operational & Partnership, Multicultural & Seniors grant program.

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

Activities

* indicates a required field

Tell us about your organisation or group's regular social activities in two to three sentences *

Word count:
Must be no more than 50 words.
Note: This description may be included in public Council reports and in promotional materials.

Activities

Using the below, tell us about each activity your organisation or group regularly undertakes.

Regular activity	Activity frequency
One per row. List each regular activity	weekly/fortnightly/monthly

Are you applying for funding to provide regular meals (prepared at your meeting venue) for your members? *

○ Yes ○ No

You must meet in a venue with a commerical kitchen to be eligible to receive funding for meals *If your group only provides tea/coffee/biscuits you should answer 'No' to this question.

Who will participate in your activities? *

Select all that apply

Certification and Feedback

* indicates a required field

Privacy Notice

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 you wish to alter any of the personal information you have supplied, please contact the Kingston grants officers on 1300 653 356 or email community@kingston.vic.gov.au

Non-personal information provided, along with general information about your grant, may be used in public Council reports. Personal and applicant financial information will remain confidential.

A full copy of our Privacy Policy may be obtained from the Kingston website: www.kingston.vic.gov.au/Contact-Us/Privacy or from one of our Customer Care Centres or Libraries.

This section must be completed by a Committee member on behalf of the organisation or group (this person may be different to the main 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 and Funding Agreement.

I agree *
○ Yes

Name of authorised person *
First Name Last Name
Must be a Committee member

Position *
Position held (e.g. President, Secretary, Treasurer)

Phone number *
We may contact you to verify that this application is authorised by the group or lub

Email *
Must be an email address.

Date *
Must be a date

Applicant Feedback

Before you **submit** please take a moment to provide some feedback

How did find the online application form?
○ Positive
○ Neutral
○ Negative

Is there anything you would like to tell us to help improve the process or form?
○ Yes
○ No

Choose a category:

○ Form feedback ○ Process feedback ○ Other

Please provide your feedback

Word count:
Must be no more than 100 words.

What Happens Next

Thank you for your application.

Once you select **submit**, a confirmation email with a copy of your application will be sent to the address you registered with. If you do not receive this confirmation, please check that your application was submitted correctly and check your junk or spam folder.

All eligible applications will be assessed via the funding formula. We may contact you if further information is required.

All applicants will be notified of the outcome following the June 2027 Council meeting.

For further information about Kingston's Operational & Partnership - Multicultural & Seniors grant stream or to view the Guidelines please visit https://www.kingston.vic.gov.au/community/grants/grants-program or contact the Kingston Grants Officers on 1300 653 356 or email community@kingston.vic.gov.au

Applicant Demographics

This section is not compulsory

Kingston City Council 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 LGBTQIA+ community
- ☐ Prefer not to say
- ☐ Other (please specify)

Please specify: