

# QCOAL FOUNDATION COMMUNITY GRANT PROGRAM APPLICATION FORM COMMUNITY SPIRIT GRANT & COMMUNITY GROWTH GRANT

I AM APPLYING FOR:				
COMMUNITY SPIRIT GF Awarded every three mor Maximum \$2,000 per gran	nths A	OMMUNITY GROWTH GRANT warded yearly in February Maximum \$15,000 per grant	г	
ORGANISATION DETAILS				
Organisation Name:		ABN:		
Phone number:		Fax number:		
Postal address:				
Is your organisation registered for GST?				
Does your organisation have endorsed Deductible Gift Recipient (DGR) status? ☐ Yes  If YES, please specify: ☐ DGR 1 ☐ DGR 2				
Does your organisation have Charity Tax Concession Status?			☐ Yes	□ No
Contact person:				
Phone number:		Fax number:		
Mobile:		Email:		
Postal address:				
Street address:				
Please describe the main activities and goals of your organisation:				
PROJECT DETAILS				
Project Title:				
Grant amount requested:				



	hich your project is aligned:			
☐ Health				
☐ Liveability				
☐ Education	1			
☐ Other (please of	describe):			
Please include: 1)	he project for which you will use the community need it aims to project, and 4) where the projec	meet 2) how this need was ide	entified 3) who and how many will	
Where the project is physically located? (QCoal Foundation prioritises projects based in regional and remote Queensland communities.)				
How will the grant funds be allocated against your project budget? (Please provide a budget breakdown for the grant funds. Please specify what percentage of the overall budget will be covered by the grant and who else will contribute funds to the project.)				
Who will be responsible for accounting for grant funds for your project?				
Name:		Position/Title:		
Phone number:				



When will your project start and when will it be completed? (Priority will be given to projects that have already started or will commence within 1 month of receiving funds and will be completed within 6 months.)

All grant-funded projects must be started within 1 month of receiving funds, and completed within 2 months (Community Spirit Grants) and 6 months (Community Growth Grants), unless otherwise agreed with QCoal Foundation							
What are your pro	ject outcom	es? How will you	measure the	success of your	project?		
Attachments included to support your application (if any):							
☐ Quotes ☐ Corporate profile/organisational brochure ☐ Education and training ☐ Other:							
그 Quotes 그 Corporate prome/organisational proclidie 그 Education and Halling 그 Other.							
OFFICE USE ONLY:						Invoice	
Application received:		1 <sup>st</sup> Assessment:		Result:		received:	
Acknowledgement		2 <sup>nd</sup> Assessment:		Outcomes		Funds	



### **RECIPIENT OBLIGATIONS**

## By submitting your application you agree that should you be successful in receiving a QCoal Foundation Community Grant you:

- will be required to complete an Outcomes Form on completion of the funded project outlining the results of the project, confirming its completion and detailing how funds from QCoal Foundation were utilised.
- will forward copies of receipts supporting the disbursements detailed in the Outcomes Form.
- will provide at least 1 photograph of the completed project.
- will be available for interviews and/or provide information related to the project for media release.
- agree that any photographs or information provided to QCoal Foundation as part of the grant application or Outcomes Form may be used in all forms of media to publicise the Community Grant Program.
- will acknowledge QCoal Foundation's support of the project through the Community Grant Program in any related print or promotional material by using the QCoal Foundation logo and the line *Proudly supported by the QCoal Foundation Community Grant Program*.
- The logo will be supplied by the Grant Program Administrator if your application is successful.

In the event your grant application is not successful you agree that QCoal Foundation may provide all information in this application to its donor partners who may be in a position to provide grant funding. The terms and conditions of this application and the Applicant Guidelines will apply to any grant funding provided by a donor partner.

#### **Declaration**

Please check boxes to indicate the following:				
$\square$ I/We have read and understood and agree to comply with the recipient obligations.				
$\square$ I/We have read and understood the Community Grant Program Applicant Guidelines.				
$\Box$ I/We confirm all information supplied in this application is true and accurate at the time of submission.				
$\square$ I/We agree to provide QCoal Foundation with any additional information required to support our application.				
Name:		Signature:		

### Please submit your completed application to:

QCoal Foundation Community Grant Program PO Box 10630 BRISBANE QLD 4000

or by email to <a href="mailto:contact@qcoalfoundation.org">contact@qcoalfoundation.org</a>

For more information please visit <a href="www.qcoalfoundation.org">www.qcoalfoundation.org</a> or contact the Grant Administrator (contact@qcoalfoundation.org or 07 3002 2900)

Use this page if you require more space:				