

Individual Artist Grants Application Form

Form Preview

Applicant Name and Contact Details

* indicates a required field

Important Information

Before completing this application form please read the [Medium Community Grants Program Guidelines](#).

For certain projects, additional compliance with events, permits and insurances may be required. Please consider the Victorian Government regulations and advice regarding [COVID Safe Events](#).

When you have completed your application form, please ensure you click **SUBMIT** at the end of the form. You will receive a confirmation email to confirm your application has been received.

The Community Funding Team are here to help. We encourage you to speak to our team if you need support or assistance with your application. The Community Funding Team can be contacted on (03) 8571 1432 or via commgrants@cgd.vic.gov.au.

All the best on behalf of the Community Funding Team!

Confirmation of Eligibility

I confirm that the applicant:

- Has read and understands the program guidelines.
- Is based within, or provide services to, the residents of the City of Greater Dandenong.
- Is not employed by the City of Greater Dandenong Council.
- Has complied with the conditions and reporting requirements of all previous grants and funding provided by the City of Greater Dandenong.
- Will implement their proposal within the Medium Grants Program project period.
- If projects have demonstrated evidence of a high achievement of intended outcomes they may be considered for repeat applications beyond two consecutive years of funding.
- If successful, will be required to show evidence of appropriate Public Liability Insurance.

Please select below: *

Yes

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

Applicant Details

Applicant name *

Organisation Name

Provide full name. If registered with Australian Business Register or equivalent, please ensure your name aligns with these registrations.

Postal address *

Address

Suburb

State

Postcode

Individual Artist Grants Application Form

Form Preview

Applicant website

Must be a URL.

Contact Details

Applicant Contact Details

Applicant Contact *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

This is the main person we will correspond with about this grant. This needs to be the applicant.

Secondary Contact

Secondary contact person *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please nominate a second person we can correspond with about this grant.

Contact phone number *

Must be an Australian phone number. Please include the area code.

Relation to Applicant *

e.g. Manager, Board Member, Fundraising Coordinator

Contact email address *

Must be an email address. Must be an email address that is current and checked regularly.

Contact phone number *

Must be an Australian phone number. Please include the area code.

Contact email address *

Must be an email address that is current and checked regularly.

Artist Profile

* indicates a required field

Artist Profile

Please tell us about your artist biography and experience. *

Word count:
Must be between 10 and 150 words.

Please list any Council projects/activities and/or events you have been involved in. *

Word count:
Must be between 5 and 100 words.

If applicable, have you obtained all required approvals for the proposed project? *

Individual Artist Grants Application Form

Form Preview

Word count:

Must be between 5 and 100 words.

Depending on the project you may need to obtain certain permits. Public events on Council land may require an Event Permit or Planning Permit - for further details click [here](#). Please consider Victorian Government regulations and advice regarding [COVID Safe Events](#) .

Do you have an ABN number? *

Yes

No

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	

Must be an ABN.

Individual Attachments

Please attach a copy of the following documents.

Resume and/or short biography *

Attach a file:

Example of previous projects *

Attach a file:

Project Information

* indicates a required field

Project Brief Outline

Project title - What is the name of your project? *

Individual Artist Grants Application Form

Form Preview

Must be no more than 10 words.
Your title should be short but descriptive.

Project summary *

Word count:

Must be between 10 and 150 words.
Provide a short clear overview of your project. Include what you are planning, where it will be held (location), how many people will attend and who will participate.

Who are the primary beneficiaries of this project/program? *

No more than 5 choices may be selected.
Choose the main group/groups who will receive the most benefit from this project.

What are the primary areas of focus for this project/program? *

No more than 5 choices may be selected.
List the main area this project relates to e.g. Arts, Sport, Health, Community Development.

What will be the benefits/changes for participants and/or your artistic practice? *

Must be between 10 and 150 words.
Think about the project outcomes - the effects that a project/program has on the people, businesses, community or environment that are involved in or acted upon by a particular intervention. If you need help understanding what outcomes are please talk to one of our Community Funding Support Officers on 8571 1000 or read the help sheets at www.ourcommunity.com.au/evaluation

Activities

Tell us about the activities you will undertake in order to create change. List one per row.
Please click on 'Maximise' to expand the table to full screen.

Activity	Location	Start date	End date	Explanatory notes
One per row. Add more rows if you want to list additional activities.	Where will your activity occur? Leave blank if location is unknown or not relevant. Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.	Leave blank if date is unknown or not relevant. Must be a date and between 1/7/2025 and 30/6/2026.	Leave blank if date is unknown or not relevant. Must be a date and between 1/7/2025 and 30/6/2026.	Add notes if you need to provide more context.

Individual Artist Grants Application Form

Form Preview

Outcomes

Please click on 'Maximise' to expand the table to full screen.

Which of the program outcomes will your project contribute to? If multiple apply, pick the most relevant. If you would like to add more outcomes, please click the plus sign at the end of the row or the "Add More" button in the bottom right corner. You must select at least 1 outcome. You can add up to a maximum of 5. No more than 1 choice may be selected.

Which of our outcome goals will your project contribute to? If multiple apply, pick the most relevant. If you would like to add more outcomes, please click the plus sign at the end of the row or the "Add More" button in the bottom right corner. You must select at least 1 outcome. You can add up to a maximum of 5. No more than 1 choice may be selected.	Please explain how your project activities contributes to achieving the outcome. Must be between 10 and 150 words.

Project Rationale

Please click on 'Maximise' to expand the table to full screen.

Rationale

Evidence

What is the need or desire in the community that the project will address? Must be between 10 and 200 words.	How did you identify the need for this project? Must be between 10 and 250 words.

Participation

A metric is a measurement designed to indicate the level of progress towards achieving an outcome. Each project is required to address six mandatory metrics listed below. If successful you will need to report on these metrics. Please click on 'Maximise' to expand the table to full screen.

Metric	Target	Collection method	Explanatory notes
One per row. Add more rows if you want to list additional metrics.	Identify a target for this metric - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. Attendance count, survey, interviews/case studies, focus groups, administrative data (e.g. case management data), observation/estimation, government or public dataset (e.g. Census), other datasets.	Add notes if you need to provide more context.
Total Number of participants who benefit from the project			
Number of participants who are Greater Dandenong residents			
Number of volunteers involved in the project			

Individual Artist Grants Application Form

Form Preview

Number of volunteers from the City of Greater Dandenong			
Estimated total number of volunteer hours contributed			
Number of paid staff involved in the project			

Capacity and Risk

Now that we know about your project/program, we want to find out more about your ability to undertake the work you propose.

Please provide some information about this project that will give confidence that the work described in this application can be completed on time and within budget. Include your organisation's experience/expertise and how you are going to manage potential projects risks: *

Word count:

Must be between 10 and 150 words.

Include in this section information about how you will make sure to complete the project/program within the proposed timeline. Provide information also about any past work that may demonstrate your capacity to undertake this work (e.g. staff, volunteers, expertise, etc).

Partnerships

Will any other individuals, groups or organisations contribute to or assist with delivery of the project? If so please provide details in the table below. Please click on 'Maximise' to expand the table to full screen.

Organisation	Contact Person	How will they be involved?

Supporting Healthy Partnerships

City of Greater Dandenong is looking to guide community organisations and grant applicants towards creating healthier partnerships when engaging with the Community Grants Program. Healthier partnerships promote moving away from supporting harmful industries such as alcohol, tobacco and gaming industries. By doing this, Council can create an environment where community organisations and grant applicants seek healthier local options to support their community events and projects.

Will the grant funding you are applying for be used to purchase or promote the consumption of alcohol or increase exposure to gaming activities?

Yes

No

Individual Artist Grants Application Form

Form Preview

Please describe the details of how funding received would be used to support one or more of the above mentioned industries?

Project Budget

* indicates a required field

Please consider the below points before completing the project budget section:

- Budget to be GST exclusive
- Please provide full details for the entire project cost, not just the portion you wish to be covered by this grant application.
- Please provide clear and detailed information about your project income and expenses.
- Where possible break down larger expenses into smaller items. Do not combine expenses into unclear categories (e.g. "Activity Expenses").
- Provide clear descriptions for each budget item (e.g. for income: "Entry Fees" or "Business Sponsorship", or for expenses: "Venue Hire" or "Facilitator's Fee").
- Where possible include the unit cost and quantity in the Expenses table (e.g. "Venue Hire \$20 per hour x 12 hours").
- Do not include in-kind contributions in the Income and Expenses tables. These can be listed separately in the In-Kind Support table.
- For organisations that are GST registered all amounts should be GST exclusive.
- Please round up your budget items to 'whole' dollar amounts.
- Your budget **MUST** balance (INCOME LESS EXPENSES should equal \$0).

Total Amount Requested

*

How much is the grant that you are requesting from Council?
Note: This is referring to cash only not in kind. This should be the same as the first line of the Income section of the Project Budget.

EXPENSES

Please indicate in the expense description which items are being covered by this grants. You can do this by placing "CGD" behind your expense item. Please click on 'Maximise' to expand the table to full screen.

Expense Description	Quantity	Expense Amount (\$)	Funding Source
E.g. Catering, food, equipment, venue hire, staffing, facilitator, etc.			Please tell us where the funding will come from (either Council, In Kind or other income source).
		\$	
		\$	
		\$	

Individual Artist Grants Application Form

Form Preview

		\$	
		\$	
		\$	

TOTAL EXPENSES

\$

INCOME

Include any income including group contributions and other grants in this section. Please click on 'Maximise' to expand the table to full screen.

Income Description

Income Amount (\$)

Grant Requested from the Medium Grants Program	\$
	\$
	\$
	\$
	\$
	\$

TOTAL INCOME

\$

INCOME LESS EXPENSES (This amount should be zero)

\$

IN-KIND SUPPORT

What other resources will you need in order to successfully carry out this project?

Non-financial inputs could include staff time, volunteer labour, borrowed equipment, donated materials, free use of facilities, or other pro bono or in-kind contributions and support.

We suggest that general volunteer labour is valued at \$43 per hour. Project management and volunteer supervision can be valued at \$35 per hour. Donated professional services may be valued at the prevailing market rate.

In-Kind Item

Estimated Value (\$)

	Must be a dollar amount.
	\$
	\$
	\$
	\$

TOTAL IN-KIND SUPPORT

\$

Individual Artist Grants Application Form

Form Preview

This number/amount is calculated.

TOTAL PROJECT VALUE

\$

This number/amount is calculated.

Please attach quotes for venue hire, equipment or services (catering company) expense items that will be paid from the requested grant.

Attach a file:

What is the minimum amount of funding from City of Greater Dandenong this program/project can be run with? *

\$

Must be a dollar amount.

If you need full amount, just type full grant amount. Only change if you CAN run with minimum.

Additional Attachments:

Attach a file:

Any further information can be added here. Please note that this is not necessary.

Certification and Feedback

* indicates a required field

Privacy Collection Statement

The personal information is being collected by the by Greater Dandenong City Council for the sole purpose of Council's Medium Grants Program. Your personal information will be held securely and used solely for the purpose it is collected for or a directly related purpose. It will not be disclosed to any external party without your written consent, unless required or authorised by law. If you fail to provide the requested information, Council may be unable to process your application. If you wish to access or amend your personal information, or if you believe your personal information has been breached, please contact Council's Information Privacy Officer on 8571 1000. Greater Dandenong City Council is strongly committed to the responsible handling of personal information and is compliant with the Privacy and Data Protection Act 2014 and the Health Records Act 2001. A copy of Council's Privacy and Personal Information Policy is available on Council's website at www.greaterdandenong.com.

Certification

This section must be completed by the individual applicant or an appropriately authorised person.

I am the applicant or authorised to complete this form on behalf of the applicant and I certify that to the best of my knowledge the statements made within this application are true and correct and I will inform Council about any inaccuracies or changes. I understand that if City of Greater Dandenong approves a grant,

Individual Artist Grants Application Form

Form Preview

I will be required to accept the conditions of the grant as outlined in the grant application, policy and/or letter of approval.

I agree *

Yes

Name of authorised person *

Title First Name Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Applicant or other authorised position.

Contact phone number *

Must be an Australian phone number.
Please include the area code. 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.

When you have completed this form please click the **REVIEW** button at the end of this page. At the end of the review page press **SUBMIT**. Each applicant will receive a confirmation email when they successfully submit the form. If you haven't received the confirmation email please contact the Community Development Funding Officer on (03) 8571 1432.

Application Support and Feedback

You are nearing 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 on the application process and support provided. Your feedback is highly regarded and welcomed.

How did you learn about the Council's Community Grants Program? *

- Previous applicant
- Information provided by Council officer
- Social Media
- Newspaper advertisement
- Community Development E-Newsletter
- Council website
- Word of mouth
- Other:

Please indicate how you found the online application process: *

- Very easy Easy Neutral Difficult Very difficult

Have you spoken to a Council Officer in the development of your application? *

- Yes No

Which Council Officer(s) did you speak with?

Have you attended a grant information session this round? *

- Yes No

If yes, what aspect of the project/grant application did you discuss with the officer(s)?

Individual Artist Grants Application Form

Form Preview

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60 minutes

- Grant round information/guidelines
- Project idea
- Project design
- Budget and quotes
- Completing grant application
- Other:

Please provide any comments or feedback regarding your application experience and any suggestions for future improvements.

Word count:

Must be no more than 100 words.