

Mentoring for Grant Writing - Application Form

Form Preview

Grant Mentoring Program

* indicates a required field

Does this sound familiar?

You've made a start on a grant submission but were overwhelmed with the complexity of the application. # You know funding is out there, but just can't pull together a winning grant application. Council is offering an innovative mentoring program to support the region's not-for-profit community groups, associations and clubs with developing grant writing skills. This is a training and development program, not a grant writing service. The mentoring program provides groups with access to experienced local mentors who have knowledge and experience in successful grant writing. Council will fund a mentor to work one-on-one with your group when applying for up to two (2) different grants and one (1) acquittal. Not only does this give your members valuable skills in grant writing, but your group will be able to retain these best practice grant applications as templates for future submissions. For more information about the mentoring program please visit www.lockyervalley.qld.gov.au or contact Council's Community Engagement Team on 1300 005 872 or email engagement@lvrc.qld.gov.au.

Eligibility Criteria and Terms Conditions

Applications under the Mentoring for Grant Writing Initiative will be considered from not-for-profit community, environmental, cultural or sporting-focused organisations based within the Lockyer Valley region and which meet the eligibility criteria and terms and conditions, including:

1. Submissions will be assessed against the eligibility criteria. Successful applicants will be advised of the outcome of the application within seven (7) business days. Applications that do not satisfy the eligibility criteria may not be considered.
2. This initiative is not a grant writing service but funds a consultant to mentor two or more members of your not-for-profit organisation in writing quality grant applications. The mentor is engaged to work with the group over a maximum period of three weeks per grant application from the date of commencement.
3. A minimum of two members from your group are required at each mentoring session. This is to ensure the training, knowledge and skills are not lost if the group's main grant writer leaves.
4. This service is offered in good faith and neither Lockyer Valley Regional Council nor the mentor will be liable for the success of any funding submission prepared within or following any approved mentoring.
5. To ensure the initiative provides value for money, only grant submissions with a minimum value of \$3000 will be approved.
6. Is located in (and/or supplies services to) **Lockyer Valley Local Government Area**
7. To ensure Council can evaluate the value of the program, successful applicants will agree to the following reporting requirements: # A copy of the signed grant submission is to be submitted to Council within five business days of lodgment. Where a copy of the form cannot be obtained, the group will need to provide Council with a typed summary of

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the application; and # Notification is to be provided to Council on the outcome of the grant submission. For more information call 1300 005 872 or visit www.lockyervalley.qld.gov.au
Mentoring for Grant Writing Initiative

8. Applications will only be accepted on the approved application form. Applications must be submitted and approved by Council before commencement of engagement with the Consultant. Any work with or engagement of a consultant prior to or outside the terms and conditions of this initiative will be at the group's cost.

9. Final approval will be subject to an evaluation process by Council.

10. Due to budget limitations and a competitive process, not all eligible projects may be approved.

I confirm that I have read and understood the terms & conditions relating to the eligibility criteria *

- ☐ Yes
☐ No

Ineligible Criteria

Based on the response you have provided above, you are not eligible to apply for this program. For more information, please speak to an officer of the Community Development & Engagement Team on 1300 005 872 or email CETeam@lvrc.qld.gov.au

Contact Details

* indicates a required field

Organisation Information

Applicant *

Organisation Name

Applicant Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant Primary Phone Number

Must be an Australian phone number.

Applicant Primary Email

Must be an email address.

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Applicant Admin Information

Applicant Admin Contact *

Title First Name Last Name

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Applicant Admin Contact Position *

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Applicant Admin Contact Postal Address *

Address

Applicant Admin Contact Primary Phone Number *

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Must be an Australian phone number.

Applicant Admin Contact Primary Email *

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Must be an email address.

Organisation Details

Organisation Purpose

How many members are in your organisation?

--

Approximately how many community members does your organisation support each year?

--

On a scale of 1-10 how would you rate your grant writing abilities?

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Must be a number.

1 = Lowest; 10 = Highest

Are your activities primarily in the Lockyer Valley? (Note: you must also be based in the Lockyer Valley)

☐ Yes ☐ No

Ineligible Criteria

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Organisation Details

What is the aim of your organisation?

Is your organisation?

☐ Not-for-profit

☐ Incorporated

How is your organisation funded? (Note: Funding sources include Federal Government, State Government, Lockyer Valley Regional Council, Community Fundraising, Fee for Service, Private Fundraising, Member Funded or Not Funded) Please list all applicable:

Organisation Details Continued

* indicates a required field

What purpose or activity do you require assistance to write a grant for? (e.g. new equipment - Please specify; improve facilities - what and how; to run an event - what and when; etc.)

Requesting Grant Amount

Project Title

Short project description

Provide a short description (100 words recommended) of your project - what are you out to do?

How much are you requesting with your grant application?

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\$

Must be a dollar amount.

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

List the names and positions of the members who will attend this mentoring training (Must have 2)

Attendee 1: *

Title First Name Last Name

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Position *

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Attendee 2: *

Title First Name Last Name

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Position *

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Attendee 3: (Optional)

Title First Name Last Name

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Position

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Declaration

* indicates a required field

I certify that...

- I certify that to the best of my knowledge the statements made in this application are true.
- I understand that if the Council approves a grant, I will be required to accept the conditions of grant in accordance with the Council audit requirements.
- I consent to the information contained within this application being disclosed to or by the Council for the purpose of assessing, administering and monitoring my current and any future the Council applications.
- I understand that if the Council approves an application, I will be bound by the contents of my application to carry out my project as I have described and my application will form part of my contractual agreement with the Council.

Name

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

Position

Date

Must be a date.

Declaration *

☐ I agree to the above

Feedback

Applicant Feedback

You are now nearing the end of this form. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the application process:

- ☐ Very Easy
- ☐ Easy
- ☐ Neutral
- ☐ Difficult
- ☐ Very Difficult

How many minutes total did it take you to complete the application?

Must be a number.

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

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