Stronger Communities Programme Round 8

Expression of Interest Form

Expressions of Interest submissions close **17th March at 5PM**. Please return to [**eric.seychell@aph.gov.au**](mailto:eric.seychell@aph.gov.au) **and** [**sally.delaney@aph.gov.au**](mailto:sally.delaney@aph.gov.au)and/or **PO Box 83, Thomastown VIC 3074** by the closing date to be considered for funding.

## Organisation detail

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation name Where you have a sponsor arrangement, this must be the name of the sponsor organisation who is eligible to apply. |  | | |
| ABN |  | | |
| What type of entity are you? You may be required to provide proof of incorporation if applicable. | Incorporated Not-for-profit Organisation  State government agency that is a fire service, country fire authority, state emergency service or similar  Local Governing Body eg. ***Local council***  ***(This will limit your grant to 50% of eligible project expenditure)*** | | |
| Are you a trustee on behalf of a trust? If yes, please provide both the Trust and the Trustee’s ABN. Circle the correct answer. | Yes No  Trust ABN:  Trustee ABN: | | |
| Are you charity registered with the Australian Charities and Not-for-profits Commission (ACNC)? | Yes No | | |
| Are you registered for GST? | Yes No | | |
|  | |  |  |
| Organisation Address Line 1 |  | | |
| Organisation Address Line 2 |  | | |
| Organisation Suburb |  | | |
| Organisation State |  | | |
| Organisation Post Code |  | | |

## Nominee Contact Details

|  |  |
| --- | --- |
| Name |  |
| Position in organisation |  |
| Email Address |  |
| **Telephone number** |  |
| **Mobile number** |  |
| Address Line 1 Enter ‘as above’ if using the organisation address |  |
| Address Line 2 Enter ‘as above’ if using the organisation address |  |
| Suburb Enter ‘as above’ if using the organisation address |  |
| State Enter ‘as above’ if using the organisation address |  |
| Post Code Enter ‘as above’ if using the organisation address |  |

## Project Information

|  |  |
| --- | --- |
| Project title |  |
| Project description What are your key project activities and outcomes? |  |
| Project outcome/Why is the project important? Explain how your project supports and encourages local community participation and delivers social benefits to the local community. |  |
| **% of project value undertaken at site** |  |
| Project Site LocationAddress Line 1 Please ensure this street address is within the nominating electorate. |  |
| Project Site LocationAddress Line 2 Please ensure this street address is within the nominating electorate. |  |
| Project Site LocationSuburb Please ensure this street address is within the nominating electorate. |  |
| Project Site LocationState Please ensure this street address is within the nominating electorate. |  |
| Project Site LocationPost Code Please ensure this street address is within the nominating electorate. |  |