Eligibility

* indicates a required field

indicates a requ	ined neid		
○ Yes○ No - you are r		this funding. Please do	NOT submit an application u are in a team you still need to
		olicant live in? (you o	an look this up by clicking
on the link belo □ Div. 1 □ Div. 2 □ Div. 3	Div. 4 □ Div. 5 □ Div. 6	□ Div. 7 □ Div. 8	□ Div. 9 □ Div. 10
		res in? Find out on the and type in the address	
Government Ar least the precedent		nt resident of the Sur g in one of the divisi	nshine Coast Local ons listed above) for at
	nust have been a permar		NOT submit an application ine Coast region for at least the
•	ams (with membe	rs from Sunshine	Coast Local

Government Area) attending the same event

The total amount of funding to members of a group or team attending the same event cannot exceed \$2,000. Any team member who wishes to apply, must submit their own application. Team applications will not be accepted, however all eligible members of the same team who wish to apply MUST submit their applications within the same assessment period. For further information phone the Grants Team on 5420 8616.

Is the applicant part of a group or team that has other members from the SCLGA attending the same event *

O No - there are no other members of the team from the SCLGA - please continue O Yes there are other members of the team from the SCLGA - note that all eligible members of the same team from the SCLGA (who wish to apply) must submit their application within the same assessment period. *

*This may require a coordinated approach from a team representative. (Assessment periods end January, March, May, July, September and November of each year)

Type of Event

What type of activity are you requesting funding for?

O Other
Sporting Event
Is the event recognised by a National Sporting Organisation that is endorsed by the Australian Sports Commission? O Not sure - Please refer to Australian Sports Directory for eligible organisations. Link is below. O Yes - event is eligible O No - event is not eligible. Please do NOT submit an application.
Australian Sports Directory <u>link</u>
Is the applicant competing at a National or International competition? * Yes - National (ie you are representing the state). Please continue. Yes - International (ie you are representing Australia). Please continue. No - State (ie you are representing your region, eg Sunshine Coast) - Not eligible. Do NOT submit an application. Refer to link below for State or Federal grant opportunities No - Regional (ie you are representing your club/team) - Not eligible. Do NOT submit an application. Refer to link below for State or Federal grant opportunities
Other funding opportunities
Your activity may be eligible for a State or Federal Government grant. Please refer to the links below regarding eligibility and submission of an application.
State Government Sporting Grants - <u>Emerging Athlete Pathways</u>
Federal Government Sporting Grants - <u>Australian Sports Commission - Grants and Funding</u>
Is the applicant performing, competing or presenting at a National or International competition, conference or event? O Yes - National O Yes - International O No - not eligible. Please do NOT submit an application
Please note that individuals are eligible to receive funding for one national and one international competition, conference or event per calendar year only.
Have you already received funding for the same type of event (national OR international) this calendar year? O Yes - please do not apply again. You need to wait until next year No - please continue
Has the applicant been selected to attend by a governing body? * O Yes - attach evidence of your selection below - You will not be eligible for funding if you do not supply this evidence O No - you are not eligible to apply for this funding. Please do NOT submit an application

The letter of selection MUST include the following information: * □ Be on official letterhead of the governing body □ Applicant name □ Event title □ Event date/s □ Event location
Please check each box to confirm your letter includes ALL required information. If the letter doesn't include this information you may not be eligible for funding.
Attach the official letter of selection from a governing body Attach a file:
If you are unable to attach, please post or email this evidence to grants@sunshinecoast.qld.gov.au
with your Grant ID number.
Activity Description
* indicates a required field
Activity Title *
Name of competition, conference or event. e.g. U19 National Netball Championships or Delivering paper at Acme national conference. (10 words maximum)
Has the activity already commenced? ★ ○ No
 Yes - you cannot apply for funding. Do NOT proceed with application.
Activity start date (must not have already started) *
Must be a date. Activities starting before the application is submitted are not eligible
Activity finish date *
Must be a date.
Describe the activity and your level of participation *
Word count: Must be no more than 110 words. Provide a short description (100 words recommended) of your project - what are you out to do?
Where will your activity take place? (City & State or County if overseas)
Where will your competition, conference or event take place?

How will your participation in the activity benefit your local community? *
Previous Funding
Lower priority is given to applicants who have been funded in the previous 12 months
Has the applicant received funding from council in the previous 12 months? * ○ Yes ○ No
If the applicant has received past council funding, has the funding been acquitted? * O Yes O No - you cannot receive further funding. Please complete your acquittal as soon as possible. O Not applicable - no previous funding

Funding amounts

* indicates a required field

What items are eligible for funding?

Funding will **only** assist with expenses incurred in attending an activity - travel costs, accommodation costs, entry fees and registration fees. **Applicant must keep a record of expenditure, plus copies of invoices or receipts, in order to acquit your project**. The maximum amount of funding available is \$500. Groups or teams attending the same activity can apply for a group total of up to \$2000.

Please tick the region where activity will take place. Please note the maximum amount of funding available for each region.

- O International activity, overseas beyond Australasia/Oceania \$500
- O International activity, overseas within Australasia/Oceania \$450
- O International activity, within Australia, excluding Queensland \$400
- O International activity, within Queensland \$350
- O National activity, interstate beyond NSW & ACT \$300
- National activity, interstate NSW & ACT \$250
- O National activity, within Qld beyond S.E. Qld \$250
- National activity, within S.E. Qld (Including Bundaberg) \$200

Based on the region you selected above, what is the amount you are seeking from council? *

\$ Must be a dollar amount.

What items are you seeking funding for? * ☐ Travel costs
□ Accommodations costs
□ Entry fees□ Registration fees
You may choose more then one
What is the estimated total cost for the applicant to participate in the activity? *
Must be a dollar amount. What is the total budgeted cost (dollars) of your project?
Applicant Details
* indicates a required field
Applicant Details
Individual Applicant (Name of person participating in activity) * Title First Name Last Name
Applicant Residential Address (if your address doesn't appear automatically, choose 'Can't find my address' and then enter manually) * *
Address
Address Line 1, Suburb/Town, State/Province, and Postcode are required. Applicant must reside in the Sunshine Coast Local Government Area to be eligible for funding in this program
Is applicant under 18 years of age? *
NoYes - please provide name of parent/guardian below
Name of parent/guardian if applicant is aged under 18 Title First Name Last Name
Phone Number *
Must be an Australian phone number.
Mobile Phone Number
Must be an Australian phone number.
Email Address *

Must be an email address.
Must be all citial address.
Payment Details
* indicates a required field
Once funding recommendations are approved by council, notification letters are emailed to all applicants. Payments are made via electronic funds transfer to the bank account nominated below. Applicants under 18 must include the bank account details of a parent/guardian.
Name of your bank *
Bank BSB Number *
Name on Bank Account *
Bank Account Number *
Email address for payment queries *
Must be an email address.
You will receive an automated email notification to the above email address when funds have been transferred into your account.
It is your responsibility to ensure that all details are correct. Payment will be made to the

above account if the application is successful. Any errors will result in a delayed payment.

Statement By Supplier *

O I confirm that this funding will be used for an activity that is a private recreational pursuit or hobby and so is exempt from withholding tax

Privacy & Certification

* indicates a required field

Privacy

Individual Development Grant 2023/24 Application Form

Council will use any personal information provided for the purpose of processing your grant application and for remaining in contact with you. Council is authorised to collect this information in accordance with the Local Government Act 2009 and other local government acts. Your personal information is only accessed by persons authorised to do so.

Please note the information provided on your grant application and in any related documentation/discussions may be provided to members of the assessment panel in order to assist council in processing your grant application.

By submitting an application you consent to council publishing your name, activity description and amount funded on our website, this information may also be used for promoting council's grant program.

Your personal information is dealt with in accordance with council's Privacy Policy

I agree to the privacy statement above * O Yes				
Certificati	on			
 the apple Area for if success council r council success if success if success 	licant has been at least the pressful, I will be re equirements does not accep ssful, I will ensu ed project comp ssful, I will ensu	in this application are true a permanent resident in the Sunshine Coast Local Government eceding 12 months equired to accept the terms of the grant in accordance with t any liability or responsibility for the project ure that acquittal requirements are met within 8 weeks of the pletion date ure that funds are claimed within three months of notification olete the project within twelve months of receiving council		
I agree to to Yes	he above *			
	person's nam			
Title Fir	st Name	Last Name		
	-	of age, this must be a parent or legal guardian		
Authorised	person's posi	ition		
	ed person is a pa ase leave blank.	arent or guardian, please indicate here. If authorised person is the		

Additional Support - Contact Details

Authorised person's phone number *

Must be an Australian phone number.

If you require extra support, please contact us by:

- Phone (07) 5420 8616 during business hours 8.30am to 4.30pm
- Email grants@sunshinecoast.qld.gov.au

Have you posted supporting documents? *

• Post - to Grants Officer, Sunshine Coast Council, Locked Bag 72, Sunshine Coast Mail Centre, Qld 4560.

If emailing or posting documents, please quote your application number. Please do not email or post any documents that you have already attached to this application.

YesNo
Submit
You are now ready to submit. Read and acknowledge message below, then click on "Next page" to review, then Submit. * You will receive a confirmation email when your application has been submitted. If you do not receive this email then your application has NOT been submitted. Please ensure all questions have been answered and try again. (Check box here to acknowledge that you understand this.)