Welcome

* indicates a required field

Introduction

Before completing this application form, you should have read the Youth Climate Action Fund guidelines.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. You must complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you need more help using this form, download the <u>Help Guide for Applicants</u> or check out <u>SmartyGrants applicant FAQs.</u>

Should you require assistance with completing your application, contact the grants officer on 03 6238 2132 or grants@hobartcity.com.au.

If you do contact us throughout the application process, please quote the application number below:

App	lication	Num	ber
-----	----------	-----	-----

This field is read only.

The identification number or code for this submission.

Privacy notice

We pledge to respect and uphold your rights to privacy protection under the <u>Australian Privacy Principles</u> (APPs) as established under the <u>Privacy Act 1988</u> and amended by the <u>Privacy Amendment (Enhancing Privacy Protection) Act 2012</u>. To view our privacy statement, go to https://www.hobartcity.com.au/privacy.

Commercial in confidence

The information you provide as part of your grant application will be treated as commercial in confidence. This information will be used for the purposes of assessing your grant application and, if successful, it will also be used in the management of your grant agreement. The Council will not disclose this information unless required or permitted by law.

Confirmation of eligibility

I confirm that the application:

 will help create a climate ready Hobart by focusing on one or more of the fund priorities to reduce emissions, build climate resilience and/or mobilise community action.

Form Preview

- benefits to the wider Hobart community.
- is youth-led.
- has outcomes that are delivered in the City of Hobart local government area.
- starts from 1 August 2024
- has an outcome by 31 December 2024
- has not received other funding from the City for the same activity this financial year.
- has fulfilled the conditions of a previous City of Hobart grant by the due date and has no overdue debts to the City.

no overdue debts to the City.	
I confirm I have read and under this application meets all grad O Yes You must confirm that all statements	○ No
 Is the applicant: * a youth-serving organisation a youth-led organisation a group of young people aged 	l between 15 and 24 years old
Have you, your group or your Hobart before? *	organisation received funding from the City of
○ Yes	○ No
Contact details	
* indicates a required field	
Applicant details	
Applicant (or name of the group) *	Organisation Name Name of the organisation, group or entity. (Not the individual's name.)
Street Address *	Address Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia
Postal Address	Address
Phone number *	Must be an Australian phone number.

Email address *	Must be ar	email address.		
Website *	Must be a	URL.		
Primary contact details				
This person will receive general c	orrespond	ence relating to th	nis application.	
Contact name *	Title	First Name	Last Name	
Position held in the organisation *	e.g. Manag	er, Board Member o	or Fundraising Coord	linator
Phone number *	Must be ar	Australian phone n	umber.	
Mobile phone number *	Must be ar	Australian phone n	umber.	
Email address *	Must be ar	email address.		
Are you the head of the organisation applying for this grant? *		respondence relatin f the organisation.	○ No g to this application	will be sent to
If successful, are you happy for your contact details to be provided to the media? *	○ Yes	○ No		an provide ative contact s
Head of the organisation				
This person will receive formal correspondence relating to this application.				
Head of Organisation/ group *	Title	First Name	Last Name	
Position *				
Email address *	Must be ar	email address.		

Organisation details

* indicates a required field

What type of organisation is th ○ Not-for-profit organisation ○ Registered charity ○ Incorporated association	ne applicant? * O Registered school or training organisation O Social enterprise O Other:
Commercial (For Profit) OrganisGroup	ation or
What is the purpose of your or	ganisation/group? *
	ribing the applicant's reason for being and its activities. This dia statements and external communications related to this
Does your organisation/group ○ Yes	have an ABN? * O No
ABN details	
Applicant ABN *	
The ABN provided will be used to I check that you have entered the A	ook up the following information. Click Lookup above to BN correctly.
Information from the Australian Busin	ess Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	

Must be an ABN.

Main business location

Form Preview

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from the ATO website.

Please upload the completed Statement Attach a file:	of Supplier Form: *
Max 25mb per file uploaded	

Social enterprises

Social enterprises are businesses that trade to intentionally tackle social problems, improve communities, provide people access to employment and training, or help the environment.

The enterprise derives a substantial portion of its income from trade and reinvests 50% or more of its annual profits towards achieving the social purpose.

Please provide evidence that the social	enterprise fits this definition. *
Attach a file:	

Auspice Information

* indicates a required field

About auspicing

The applicant is a group of young people. You are required to have an auspicing organisation for the application.

Auspicing is when a nominated incorporated organisation or registered charity receives, administers and acquits City funding on behalf of an applicant.

The auspice organisation is required to:

- enter into a funding agreement with the City
- accept grant funds and pay the auspiced grant applicant
- monitor and acquit the use of funds once the activity is completed.

Ideally, the auspicing organisation will have the technical skills to guide and support the applicant in the delivery of the activity while acknowledging activity decisions remain with the applicant.

If you nominate to have your grant auspiced, both you and the auspicing organisation will need to sign the grant agreement or deed.

The grant funds will then be paid to the organisation to manage on your behalf.

Auspice Organisation Details

Auspice organisation	Organisation Name	
name *		
	Please use the organisation's full nan the same name that is listed in official that with the ABR, ACNC or ATO.	
Street Address *	Address	
Postal Address *	Address	
Website *		
	Must be a URL.	
	Muse be a one.	
Auspice ABN *		
	The ABN provided will be used to	
	information. Click Lookup above t entered the ABN correctly.	to check that you have
	•	
	Information from the Australian Busi	ness Register
	Information from the Australian Busi ABN	ness Register
		ness Register
	ABN	ness Register
	ABN Entity name	ness Register
	ABN Entity name ABN status	ness Register
	ABN Entity name ABN status Entity type	ness Register
	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type	ness Register More information
	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration	
	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions	
	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location	
	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions	
Auspice agreement *	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location	
Auspice agreement *	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location Must be an ABN. Attach a file:	More information
Auspice agreement *	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location Must be an ABN. Attach a file: Applicants who are auspiced must pr	More information rovide documentation
Auspice agreement *	ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location Must be an ABN. Attach a file:	More information Tovide documentation the auspice organisation. A the arrangement is available

Auspice Contact Details

Form Preview

Auspice contact name *	Title	First Name	Last Name
Auspice contact position held in the organisation *			
Phone number *	Must be a	an Australian phor	ie number.
Mobile number		an Australian phor	
Email address *		an email address.	
Activity details			
* indicates a required field			
Key activity information			
Activity Name *			
Must be no more than 50 character Provide a name for your project/pro		ive. Your title sho	uld be short but descript
Activity start date *		Activity end date	*
Must be a date and between 1/8/2031/12/2024. This is the date the activity is open attend or participate.		31/12/2024.	te and between 1/8/2024
Please provide a short summ	mary of yo	ur activity *	
Word count: Must be no more than 200 words. Be descriptive, but succinct. Include what you will do (i.e. the activities)			

What is the need and how will you address it? *

your response.

explore.fundingcentre.com.au/help-sheets/answersbank if you need some ideas about how to frame

from your activities (outcomes). Go to the Funding Centre's Answers Bank at https://

Has this activity been delivered before? ○ Yes	* O No
Where is the primary location(s) your ac	ctivity will be delivered? *
This can be the name of the venue or an address.	
Climate Ready Hobart	
The Youth Climate Ready Hobart Grant support	orts youth-led activities that put in place urgentate ready Hobart.
 Which priority area is your project address Zero emissions transport and communities Building climate resilience Mobilising community action 	
How will your activity will help create a	climate ready Hobart? *
	formation about our program and organisational ss here }}. Go to the Funding Centre's Answers Bankk#Qu3 if you need some ideas about how to frame
Community benefit	
How will the activity involve and benefit	t the community? *
Word count: Must be no more than 200 words. This may include community-based organisations	that will participate and/or benefit from the project.

It is helpful if you can provide evidence of community support.

Project plan

Form Preview

A project plan is a roadmap to achieve project goals. Tell us how you will complete this activity. Think about including when and how you will:

- · work with other people to deliver the activity
- promote or talk about the activity and how
- engage the community
- host events, meetings or community gatherings
- share reports or reflections
- conduct surveys
- engage with City of Hobart

You are welcome to attach a detailed project plan as supporting material at the end of the application form.

In dot points, describe how your project will be delivered. *	
Briefly list (bullet points) the specific activities that will take place and where words recommended)	they will take place (20
Youth leadership and development	

* indicates a required field

Now that we know about your activity, we want to find out more about the applicant's engagement with young people.

Applications are open to:

- **Youth-led organisations** who are composed of at least three individuals aged 15 to 24 in leadership positions who actively participate in decision making and oversight within the organization.
- **Youth-serving organisations**, while generally led by adults, provide core programs and resources intentionally designed to meet the needs of young people. This includes registered schools or registered training organisations.
- Groups of people aged between 15 and 24 years old auspiced by an incorporated organisation.

How does this activity demonst	rate youth leadership and	d involvement?
Consider those involved in the activity, How many volunteers do you ex		
Must be a number.	peer to participate in till	s decivity.
Var. maanla		

The Youth Climate Action Fund aims to empower young people to deliver urgent climate change projects in our city. We are interested in knowing the key people involved in delivering the activity.

We expect this will be a new and exciting opportunity for many people involved, so we don't expect them to necessarily have experience.

You are welcome to submit a short profile of the key people as supporting material.

Name	Role in the activity	Age range	Does this person have experience in this type of activity?

Support from the City

To help the selected project have every chance of success in delivering urgent and innovative climate projects, the City of Hobart will support recipients with access to networks, project coaching, expert advice and other critical support.

Have you had any contact with the City	,	
○ Yes	○ Not yet	
Please tell us about your contact with th	ne City of Hobart and this project. *	

Activity risk management

* indicates a required field

Public liability insurance

Public liability insurance covers a person, a business, an event, a contractor – even a community building – for costs from legal action if they are found liable for death or injury, loss or damage of property, or economic loss resulting from their negligence.

Activities seeking support through this grant are required to have public liability insurance

If your activity is being held in a City-owned venue or open space and you do not have public liability insurance, you can purchase community public liability insurance from the City of Hobart. This costs \$27 including GST. For more information, please speak to the officer about your venue or open space booking.

Do you have public liability insurance? *

○ Yes	○ No	 The grant includes costs
		to purchase public liability insurance
Please upload the public lia Attach a file:	ability insurance certificate	*
An updated certificate may be rec start and end dates.	quested closer to the date to ensur	re the insurance covers the activity
Budget		
* indicates a required field		
Expenses		
List all expected costs for your entering the dollar amount in I	activity by selecting from the Expense amount .	Item drop-down menu and
Use the Descriptio n column t	o explain what the cost covers	and how it was calculated.
Cash costs		
These are costs that you need to.	to spend cash on. You can ent	er as many items as you need
Use the + and - buttons at the	right hand side to add and ren	nove rows.
Item	Expense amount	Description
	Must be a dollar amount.	
	\$	
	\$	
In-kind costs		
	e overall value of your activity. d by you or others free of char	These are costs that you don't
•	s you spend cash on they d	
Not all activities will have in-ki	nd costs.	
Does your activity have any Yes 	y in-kind costs? * ○ No	
In-kind budget		

Item	Expense amount	Description
	Must be a dollar amour	nt.
	\$	
	\$	
	\$	

Income

Some activities **may** make money from ticket sales or receive other funding from sponsorship, donations or other grants.

Not all activities will have income. The Youth Climate Action Fund is not considered income.

Will your activity generate	income? *	
○ Yes	С	No.

Income budget details

List all expected income for your activity by selecting from the **Item** drop-down menu and entering the dollar amount in **Income amount**.

Use the **Description** column to explain where the income is coming from. You can include more detail on any unconfirmed income in the **Budget notes** section.

You do not need to include your City of Hobart grant request in this list. It is automatically calculated at the bottom of this page based on the information you have entered.

Item	Income description	Is the funding confirmed?	Income amount	Notes
			Must be a dollar amount.	
			\$	
			\$	
			\$	

Budget Totals

We have calculated your grant request based on the information you have entered above. If the amount is correct, continue to the next page. If not, review the figures above.

Total cash amount	Total income amount (if any)	
\$	\$	
This number/amount is calculated.	This number/amount is calculated.	

Funding request

This grant program provides cash support between \$1500 and \$7500 per application.

We have calculated your grant request based on the information entered above.

If the amount is correct, continue to the next page. If not, review the figures above.

Total Funding Request *	
\$	
This number/amount is calculated. What is the total financial support you are requesting	ng in this application?
Would you be open to accepting partial f	unding if it was offered? *
Yes	O No
Budget Comments	
This is a space to make budget comments if y further clarification of what you have written in	
Additional comments	
Support Material	
City venues and permits	
The City of Hobart does not "in-kind" sup or permits through this grant program.	port for venue or equipment hires, fees
If a council venue, space, equipment, permit of need to make a tentative or confirmed booking	

Is the activity using a city venue, equipment or has fees

○ Yes ○ No

City of Hobart confirmation(s)

Please upload correspondence from the appropriate booking officer, which should outline the dates, times and prices excluding GST. Please note that applicants who book Council equipment are responsible for any associated logistics including the cost of transport.

This should be discussed with the officer you make the booking through.

Any payment required for this activity will need to be made by the applicant directly to the relevant business unit of Council.

Item Description	Quoted fee (exclusive of GST)	Booking correspondence
Please quote the booking reference provided to you.	Must be a dollar amount.	
	\$	
	\$	

Application Support Material

Support material must be directly relevant to the activity and complement rather than duplicate information already provided in this application.

A maximum of eight (8) items may be submitted.

Suggested support material may include:

- recent examples of your work and/or that of the key personnel (visual, aural or literary)
- evidence of community support (e.g. a letter of support from a community organisation that may directly or indirectly benefit from and that shows an understanding of your activity).
- summary of people involved in the activity
- other documentation or materials which will help the assessors understand your activity.

Acceptable formats, sizes and quantities:

- word documents, pdfs, jpgs and mp3 files
- maximum 5MB per file
- maximum of three URLs that directly link to relevant webpages uploaded in a document
- passwords must be provided for private links to YouTube, Vimeo etc

The following are not considered as support material and will not be assessed:

- Facebook pages
- annual reports
- minutes of meetings (including AGMs)

Uploading Support Material

Item Description	Upload your Files here	Website
		Must be a URL.
_		

Declaration and feedback

* indicates a required field

Payment Information

If your request is approved, we can provide an electronic transfer of the funds into your account within fourteen (14) days of receiving your signed grant agreement.

If you would like the City of Hobart to issue the funds via an electronic transfer, we will need to generate a tax invoice on your behalf, this is called a Recipient Created Tax Invoice (RCTI).

Alternatively, you may wish to provide the City of Hobart with a tax invoice.

Please nominate how you would like to receive payment. *

- City of Hobart to generate a Recipient Created Tax Invoice (RCTI)
- Applicant to provide a tax invoice

Payment via Recipient Created Tax Invoice

To allow us to process your payment as an electronic transfer based on the information provided in this application please agree to the following statement:

- The City of Hobart and the grant recipient declare that this agreement relates to the above grant.
- The City of Hobart can issue tax invoices in respect of this grant.
- The grant recipient will not issue tax invoices in respect of this grant.
- The City of Hobart acknowledges that it is registered for GST and that it will notify the grant recipient if it ceases to be registered.
- Acceptance of this RCTI constitutes acceptance of the terms of this written agreement.
- Both parties to this supply agree that they are parties to an RCTI agreement.
- The grantee must notify the City of Hobart within 21 days of receiving this document if the grant recipient does not wish to accept the proposed agreement.

Please confirm the following *

- O The Grantee acknowledges that it (or the auspice organisation) is registered for GST and that it will notify the City of Hobart if it ceases to be registered
- O The Grantee acknowledges that it (or the auspice organisation) is not registered for GST.

Applicant bank details

Must be a valid Australian bank account format.

Please provide Account Name	the bank account detail	s for the electronic transfer
BSB Number	Account Number	
Must be a valid Aus	tralian bank account format.	
Auspice Orga	nisation bank details	
Auspice Primary Account Name	y Bank Account *	
BSB Number	Account Number	

Declaration *		
\square I am authorised to submit this application		
\Box I accept that my application will not be accepted if it is submitted after the deadline as		
	ebsite and/or if it does not have all the require	d information
and/or material		
	: if key details such as date(s) of the activity, t	
	ore I am notified of the outcome of the application	
	on I have provided and the statements I have	
	and they are true to the best of my knowledge	
	nation you provide to the City of Hobart, and d	
	ect to disclosure under the Right to Information	
	d that the level of funding offered to an activit	
	jet and how well the activity supports the City	to achieves
	y differ from the amount requested.	_
	I consent to the City of Hobart publishing the	
	e activity, how the funding will be used and the	e amount of
funding received on its website w		-l:+:£ +l
	the applicant will be required to fulfil the con	aitions of the
grant.	he City of Hebert from time to time about oth	or grants
offered by the City of Hobart and	the City of Hobart from time to time about other	er grants
offered by the city of Hobart and	any other similar topics.	
Name of person		
completing this		
submission *		
Position *		
Date *		
Date		
	Must be a date.	
Applicant feedback		
• •		
You are nearing the end of the ap	plication process. Before you review your app	lication and
	ake a few moments to provide some feedback	
Please indicate how you found	d the online application process: *	
○ Very easy ○ Easy	○ Neutral ○ Difficult ○ Ve	ery difficult
How many minutes in total did	d it take you to complete this application	·? *
Must be a number.		
Estimate in minutes i.e. 1 hour = 60		
How did you find out about th	is Grant Program? *	
☐ Advert in Mercury newspaper	☐ Received an email from the C	ity of Hobart
☐ Another Website (please tell us		
in the box below)		

☐ Attended an information session /	$\hfill\square$ Was told by a staff member from the City
presentation	of Hobart
☐ City of Hobart Website	☐ Was told by a previous grant recipient
☐ Hello Hobart	☐ Word of mouth
□ I am a previous applicant	☐ Window signage on Davey Street
□ Newspaper	□ Other:
At least 1 choice must be selected.	
Please provide us with your suggestions additions to the application process/form	