

Eligibility

* indicates a required field

Privacy Notice

This collection notice sets out how the City of Melville will manage your personal information. We will handle any personal information you provide in accordance with the standards set out in the Privacy and Responsible Information Sharing Act 2024 (PRIS Act).

The City of Melville collects personal information about yourself for the purposes of identification and/or administering your request. This includes your full name, demographic details such as your age, residential address, contact details and other information relevant to your request. Some forms also collect sensitive information such as health information, when necessary for completing a service. If you choose not to provide this information, we may be unable to assist with your request.

The information you provide will only be used for the purpose you have provided it. Any queries regarding access or correction to your personal information can be directed to our Privacy Officer through privacy@melville.wa.gov.au.

For full information about how we handle your personal information, [please visit our privacy page](#).

Important Information

Thank you for showing interest in the City of Melville's Community Grants Competitive Round 1 - \$1000-\$10,000 program.

- The Competitive Community Grant Round are for projects, events or initiatives that deliver broader community benefit, contribute to strategic outcomes and demonstrate meaningful community impact.
- The City aims to notify you within two months of the round closing date.
- Projects are to be delivered in the 2027 calendar year.
- Separate event or other City approvals may take up to three months.
- If you are an individual or community group and are not incorporated you will need to find an auspice organisation (for all grant requests over \$1000).

Before applying please:

- Read and understand the Grant Program Guidelines.
- Preview the Application Form, so you can gather all required information.

Confirmation of Eligibility

This section of the form is designed to help you, and us, understand if you are eligible for the Community Grants Competitive Round. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

2026/27 Community Grants Competitive Round 1 - \$1000-\$10,000

Form Preview

If you have any questions, or want to discuss your application please call 9364 0666 or email com.grants@melville.wa.gov.au

Applicants must:

- Have read and understands the program guidelines.
- Provide clear community benefit, such as social, cultural, environmental or economic value, or a clear capacity-building benefit where funding is provided to an individual.
- Align with at least one priority from the Council Plan for the Future 2024-2034.
- Be inclusive, accessible and low cost or free.
- Be delivering the activity within City of Melville boundaries.
- Hold current Public Liability Insurance or be applying for it to be supported in this grant.
- Meet any relevant City approval, venue, landowner, public liability insurance, child safety, accessibility, waste, health, planning, public art, traffic or risk requirements. Enquiries and applications should be underway, with any grant approvals be dependent on all City approvals being received.
- Include a budget, with quotes or evidence for major costs where practical.
- Not be a current employee or Elected Member of the City of Melville
- Be requesting funding between \$1000 and \$10,000
- Not be requesting venue hire fees to be waived only.
- Ensure the activity is not primarily for fundraising, political or religious promotion.
- Have not already received funding for this project or activity from the City of Melville this financial year.
- Not be in legal conflict with the City.
- Have no outstanding debts to the City, no overdue acquittals from previous City funding, not be bankrupt or insolvent.
- Ensure that the activity has not already started, been completed or been fully committed before funding approval.
- Not be applying on behalf of a Commonwealth, State or Government agency.
- Not be applying for any of the items listed as ineligible in the guidelines.
- For businesses or commercial applicants, demonstrate clear community benefit, the need for the grant funds, and show that the project is not primarily intended for private or commercial gain.
- For individual applicants, demonstrate community need or support and the capacity to deliver the activity.

Declare if you have any conflict of interest. You may leave blank if not applicable.

Are you related to any staff or elected members of the City of Melville, have strong friendships with a staff member who may be involved in a project, etc.

I confirm that all statements are true and correct *

☐ Yes

☐ No

Contact Details

*** indicates a required field**

Applicant Contact Details

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Form Preview

Applicant or Organisation Contact Details *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

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Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO.

Applicant Postal Address *

Address

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

Applicant Primary Address

Address

Applicant Website

Must be a URL.

Primary contact person *

Title First Name Last Name

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This is the person we will correspond with about this grant. It is the applicant responsibility to advise the City if they leave the organisation.

Position held in organisation

Primary Phone Number *

Must be an Australian phone number.

Primary contact person's email address *

Must be an email address.

Back-up phone number

Must be an Australian phone number.

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Form Preview

Name and position of back-up contact

Does your organisation have an ABN? *

☐ Yes ☐ No

Applicant Details

Applicant 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.

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 completed Statement of Supplier Form. You can either do this now, or wait to find out if you are successful for this grant.

Attach a file:

Payment Details

Payment Details

Please provide applicant bank details below.

- If your application is successful, payment will be made by electronic funds transfer (EFT).
- Payments can only be made to valid Australian bank accounts. No international bank account numbers are allowed.
- Payments can only be made to bank accounts in the name of the applicant/organisation.

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Form Preview

Applicant /Auspice Primary Bank Account

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Applicants Legal Structure

Select one classification from the list below that best identifies who the applicant is: *

- ☐ Incorporated not for profit organisation/community group based in or providing a service in the City of Melville
- ☐ Unincorporated not for profit organisation/community group based in or providing a service in the City of Melville
- ☐ Pty Ltd Company - Small business based in or operating in the City of Melville
- ☐ Sole trader - based in or operating in the City of Melville
- ☐ Individual (for applicants under 18, applications must be submitted by a parent or legal guardian)
- ☐ Government School or a P&C, P&F based in the City of Melville
- ☐ Non-Government School or a P&C, P&F based in the City of Melville
- ☐ Town Team
- ☐ Residents group
- ☐ Local Sporting Club
- ☐ Other:

No more than 1 choice may be selected.

Proof of Entity

Please provide evidence of your organisation's or individual legal status.

Examples include:

- Not-for-profit / Charity: ACNC Registration Certificate
- Incorporated organisation: Certificate of Incorporation (ASIC or relevant authority)
- Small business or sole trader: Business registration
- Individual: Proof of identity and address (e.g. driver's licence)
- Unincorporated group:
 - ACNC registration (if applicable), or
 - Governing document, meeting minutes, or
 - Proof of identity and address (as per individual applicants)

Add your proof of entity documentation here.

Attach a file:

If you are being auspiced please provide your auspice organisation proof of entity.

Auspice Information

* indicates a required field

- Non-incorporated community groups and individuals may apply for up to \$1,000 in their own name. If a non-incorporated group wants to apply for more than \$1,000, they must have an eligible incorporated organisation auspice the application.
- Incorporated associations can apply for funding on behalf of an unincorporated organisation. The incorporated association making the application is known as the 'auspicing organisation'. The auspicing organisation receives and manages the grant on behalf of the applicant and is legally and financially responsible for managing the funded project, including:
 - Receiving, banking and administration of funds
 - Monitoring of the project, program, event or activity funded
 - Public liability insurance
 - Collection of evaluation information
 - Project completion report/acquittal if required
- For unincorporated groups, the president or chairperson should complete the certification section. If the group does not have a structured committee, include your own details and the wording "given authority on behalf of the group to apply for funding".
- The auspice organisation you choose must be a not for profit, have an ABN and be based in Western Australia

Is your organisation auspiced by another organisation for the purpose of this grant?

☐ Yes

☐ No

Auspice Organisation Details

Auspice organisation name *

Organisation Name

Auspice Primary Address *

Address

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

Auspice Primary Phone Number *

Must be an Australian phone number.

Auspice Primary Email *

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Must be an email address.

Auspice Postal Address

Address

Auspice Mobile Phone Number

Must be an Australian phone number.

Auspice Primary Website

Must be a URL.

Primary contact person at auspice organisation *

Title

First Name

Last Name

We may contact this person to verify that the auspice arrangement is valid and current.

Position held in organisation *

Primary contact person at auspice organisation

Auspice primary contact office phone number *

Must be an Australian phone number.

Auspice primary contact email address *

Must be an email address.

Please attach an agreement letter from the auspice organisation confirming that the auspice arrangement is valid and current *

Attach a file:

The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

Does the auspice organisation have an ABN? *

☐ Yes

☐ No

Is the Auspice registered for GST?

☐ Yes

☐ No

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Auspice 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.

As the auspice organisation does 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 completed Statement of Supplier Form

Attach a file:

Auspice Statement Of Supplier Form File Upload

Project Details

* indicates a required field

Project Title *

Must be no more than 250 characters.

Provide a name for your project, program, initiative, event. Your title should be short but descriptive.

Please provide a short summary of your project - what are you seeking funding for? *

Word count:

Must be no more than 1500 words.

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Be descriptive, but succinct. Include a brief summary of what you will do, who this project is for, and what outcome you expect.

Project Dates and Details

Start Date *

Must be a date.

End Date *

Must be a date.

Location - Where will your project take place? *

Note a project must be held within the City of Melville to be eligible. If its not an event or activity where people are involved you may write N/A. Is it a City of Melville park, hall, private building, carpark, etc.

Expected number of attendees or participants *

If it's not an event or activity where people are involved you may write N/A

Primary audience *

- ☐ City of Melville residents
- ☐ Children
- ☐ Older people
- ☐ Youth (12-25)
- ☐ Aboriginal and Torres Straight Islander people
- ☐ Local businesses
- ☐ Arts and cultural audiences
- ☐ General community
- ☐ Families
- ☐ People with disability
- ☐ Culturally and linguistically diverse communities
- ☐ Sporting participants
- ☐ LGBTQIA+
- ☐ Other:

- ☐ N/A

Activity type *

- ☐ One-off activity
- ☐ Recurring program
- ☐ Annual activity
- ☐ Part of a larger project or event series
- ☐ Other:

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Have you contacted the City for an event application or to make a booking for a venue, park, etc? Or to enquire about any other approvals? *

- ☐ Yes
- ☐ No
- ☐ N/A

It is strongly encouraged to have spoken to the City Bookings Officer prior to applying for a grant if you are applying for an event or need to book a park or venue

If yes, provide further details

How much will your activity cost for the community to attend or participate in? *

- ☐ N/A - not applicable
- ☐ Free
- ☐ Low cost - under \$10 pp
- ☐ Other:

Do you have adequate public liability insurance to cover this project? *

- ☐ Yes
- ☐ No
- ☐ It's not required, no people or community involved
- ☐ I am seeking funding to assist with the public liability in this grant

Attach a copy of your public liability insurance if you have selected yes above.

Attach a file:

Attach Other Supporting Documentation

Upload any other photos or project related documents here

Attach a file:

A maximum of 6 files may be attached.

Assessment Criteria

*** indicates a required field**

Alignment with Council Plan for the Future and Strategic Objectives

All community grants must demonstrate meaningful alignment with at least one of the City's strategic funding priorities below, which support the Council Plan for the Future. Please select the one you believe it most aligns with and explain how and why you believe it aligns.

Council Plan for the Future 2024-2034 Priorities *

- ☐ Healthy, Safe and Inclusive - Healthy safe and inclusive communities with a sense of belonging and wellbeing
- ☐ Clean and Green - A clean, green and sustainable City for current and future generations

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☐ Sustainable and Connected Development - Sustainable, connected development and transport infrastructure across our city

☐ Vibrant and Prosperous - Economic prosperity and vibrant resilient communities and businesses

No more than 1 choice may be selected.

For more information on the Council Plan for the Future see the Community Grant Guidelines and/or the website <https://www.melvillecity.com.au/our-city/city-management/corporate-planning/council-plan>

1. Community benefit and strategic alignment

Your application should align with the [Council Plan for the Future](#) and demonstrate clear benefit to the City of Melville community. Consider:

- Who will benefit
- The expected community outcome, for example social wellbeing, sustainability, social connection, participation, safety, inclusion, local identity, culture, capacity building, creativity, local vibrancy or economic activity.
- Demonstrated community need and support for the project
- Participation of the community

Explain how the proposal aligns with the selected priority from the Council Plan for the Future and consider how your project will benefit the community from the notes above. *

Word count:

Must be no more than 1500 words.

For more information on the Council Plan for the Future see the Community Grant Guidelines and/or the website. Is there demonstrated community support or need for the project? Is it free or low cost to attend or participate? Will it benefit their physical or mental health? How many people will be impacted by the project? How many people do you anticipate will benefit and can attend or join in? Explain how your project provides social, cultural or economic value for the community.

If you have letters of support or other evidence that demonstrates community support you may attach them here.

Attach a file:

2. Capacity to Deliver

We want to understand that the applicant (whether an individual or organisation) has the capacity to deliver the project.

We will review your overall application, initiative, budget, timeline, resources to deliver, have you sought event approvals, relevant insurances, experience, etc.

If you have any additional project plans, staff profiles, timelines, examples of previous initiatives delivered, etc that you may want us to consider you can detail and/or attach them below.

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

some information about your organisation that will give us confidence that you can complete the work you've described in this application. *

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, etc.) and how you will complete this project/program within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Attachments relating to Capacity to Deliver assessment criteria

Attach a file:

A maximum of 6 files may be attached.

3. Budget Value for Money

The grant request should demonstrate budget accuracy, transparency and value for money.

When you complete your budget we will be considering the quotes, are the costs realistic and reasonable, have all costs to the deliver the project been considered, etc.

We would also like to know if the activity could proceed if some or all of this additional support is not approved. You may answer yes or no, or provide detail of what may be cut or reduced if full funding isn't provided. *

4. City of Melville Principles

Consider City of Melville principles of:

- Inclusion and Accessibility - extent to which the project welcomes diverse community members, considers access and inclusion needs, acknowledges Aboriginal and Torres Strait Islander people and is low cost or free to attend where possible.
- Sustainability - extent to which the project considers and reduces its environmental impact, considers low waste events, etc.
- Child Safe Melville - extent to which the project has considered child safety and wellbeing as part of the planning.

You may refer to additional information on the grants website for checklists that provide further guidance on the above.

Detail how you have considered the principles listed above. You may attach files of the checklists to demonstrate how you have considered them if appropriate. *

Attachments relating to City of Melville Principles

Attach a file:

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A maximum of 6 files may be attached.

Project Budget

* indicates a required field

Total Amount Requested (inc GST) *

Must be a dollar amount.
What is the total financial support you are requesting in this application? It should be between \$1000 and \$10,000

Expenditure
Please outline your project expenses in the expenditure table below.
Provide clear descriptions for each budget item. Examples of expenses could include 'marquee hire', 'facilitator', 'workshop materials'.
Use the 'Notes' column for any additional information you think we should be aware of.
If you are registered for GST, that amount will be added to the grant amount approved
If you are not registered for GST, the grant amount will be GST inclusive.
Quotes are encouraged wherever practical but not essential. If quotes are not available, applicants should explain how the budget estimate was determined. The City may request additional evidence before approving funding. You can upload these in the file upload area below.
Note: if successful, you will need to provide evidence of expenditure with receipts in your acquittal.

Are you registered for GST?

- ☐ Yes
- ☐ No

Project Budget - Expenditure items requested in City of Melville Community Grant Funding

Item description	Item Cost Amount \$	GST amount	Notes: Quote attached or how did you estimate this amount? Include other notes here.	
List the items you will be purchasing using City funding only	excluding GST	Must be a dollar amount.		

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Project Budget - Other Income Sources

Please outline your project income in the budget table below, including details of other income or funding that you have applied for, whether it has been confirmed or not.

Examples of other income could include corporate sponsorship, goods or services donated or in-kind, volunteer hours, ticket sales, fundraising, stallholder/vendor fees, etc.

If the applicant is making a financial contribution to the project please list this here as well.

Important: Please do not use commas in your figures (e.g. enter \$1000 instead of \$1,000) to ensure totals calculate correctly.

Item description	Income amount (budgeted) inc GST	Is this funding confirmed? Y/N	Notes
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	Must be a dollar amount.		Add notes if you need to provide further info

Project Budget - Other Expenditure

Please outline any other expenditure towards the project outside of the request for the grant funding, so we can get a total picture of the actual cost of the project.

Expenditure	\$	Notes

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Grant Request Budget Totals

Total Budget Grant Request Amount (not including GST)

This number/amount is calculated.

Total of GST

This number/amount is calculated.

Total Budget Grant Request Amount inc GST

This number/amount is calculated.

Attachments

Include other quotes and/or an overall project budget

Attach a file:

A maximum of 15 files may be attached.

Screenshots of items with the cost are accepted. Quotes are strongly encouraged to demonstrate the budget accuracy and value for money.

Certification and Feedback

* indicates a required field

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

- I certify that to the best of my knowledge, the statements made within this application are true and correct.
- I understand that if the applicant organisation is approved for this grant, we accept the terms and conditions of the grant agreement as outlined here and/or in a letter of approval.
- I will notify the City of Melville of any changes to the information supplied or to circumstances arising that are relevant to this application.

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- I understand that this is an application only and may not necessarily result in funding approval.
- I have fully read and understand this Application Form, Eligibility Criteria and Guidelines as provided by the City of Melville, pertaining to this application for a Community Grant.
- I understand, if insufficient answers are provided in my submission it may be declined. We may request further information or re-open the form before declining.
- I understand that the decision made by the City of Melville is final and not subject to an appeals process.

If funding is approved funding recipients must,

- Use funding only for the approved purpose, unless otherwise approved by the City;
- Deliver the funded activity within the approved timeframe, unless an extension or variation is approved;
- Not commence delivering the project until all approvals and insurances are provided.
- Promptly notify the City of any material changes impacting project delivery, governance, financial viability, or risk;
- Where possible, acknowledge the City's contribution and provide opportunities for Elected Members to engage with funded activities or recipients where relevant.
- Complete a short acquittal within the required timeframe on how the funds were spent - including a budget with receipts, photos and how it benefitted the community.

I agree with the above declaration *

☐ Yes

☐ No

Name of authorised person *

Title

First Name

Last Name

Position

Contact Phone Number *

Must be an Australian phone number.

Contact Email *

Must be an email address.

Date *

Must be a date.

Auspice Organisation if applicable

Name of Authorised representative from Auspice

Title

First Name

Last Name

Position

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Phone Number

Must be an Australian phone number.

Email

Must be an email address.

You may attach a letter from the auspice agreeing to the details above.

Attach a file:

Applicant 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 (OPTIONAL)

Please indicate how you found the online application process

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

No more than 1 choice may be selected.

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

Estimate in minutes ie - 1 hour = 60

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

How did you hear about this grant opportunity?

- ☐ eNews
- ☐ Email
- ☐ Facebook
- ☐ Flyer
- ☐ Poster
- ☐ Google search
- ☐ Grant Guru
- ☐ Instagram
- ☐ Newspaper
- ☐ Word of mouth
- ☐ Searched City of Melville website
- ☐ City of Melville staff member
- ☐ Other:

