



## Application for Financial Assistance

(in line with Council's Donations Policy)

Before completing this application, please ensure the [Donations](#) Policy has been read and understood to ensure that the application will receive full consideration by Council.

For any further information, please telephone Council on (02) 6817 8800 or email: [council@gilgandra.nsw.gov.au](mailto:council@gilgandra.nsw.gov.au)

Applications are to be posted to Gilgandra Shire Council, PO Box 23, Gilgandra 2827 or faxed on (02) 6847 2521.

<b>Name of Organisation/ Individual:</b>	
<b>Address:</b>	<b>Postcode:</b>
<b>Contact Person:</b>	
<b>Position:</b>	
<b>Phone No:</b>	
<b>Email:</b>	

Are you a non-profit organisation?                      Yes / No

Are you GST registered?                                      Yes / No

ABN (if applicable) \_\_\_\_\_

### APPLICATION CRITERIA

- No financial assistance will be given to privately owned businesses/ companies.
- Organisations/individuals must be Gilgandra Shire based or the funds are to be used on a service or activity for Gilgandra Shire.
- No financial assistance will be given to Government Departments or agencies or for support of Government owned facilities.
- The funds are not to be used for a social activity for members of the organisation exclusively.

**PART A**  
**APPLICATION FOR FINANCIAL ASSISTANCE**

1. Amount Requested                    \$ \_\_\_\_\_

2. Details on how the funds will be expended:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. How will other residents of Gilgandra Shire benefit from your/your Organisation's activities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Donations given to your Organisation by Council over the last three years.

<b>Amount</b>	<b>Date</b>	<b>Purpose to which funds put</b>

5. Have you/your Organisation made application for financial assistance from other bodies in the last 12 months?

YES / NO

If yes, please complete the following table:

<b>Funding Body</b>	<b>Date Application Lodged</b>	<b>Amount Sought</b>	<b>Amount Granted</b>

**PART B**

**INFORMATION REGARDING THE ORGANISATION**

1. Are you Gilgandra based?

- Yes
- No

2. Brief history of organisation/individual and current activities.

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2. Current number of members and membership eligibility requirements (if applicable).

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3. What contributions do volunteers make to your Organisation (if applicable).

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**PART C**

**ADDITIONAL INFORMATION**

1. Any additional information which you consider necessary.

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**PART D**

**FOR SPORTING ORGANISATIONS**

1. Are you a member of the *Good Sports* program?

- Yes
- No