**A heart shaped logo with black text

Description automatically generated**

**Draft Application Form**

**Stream1 - Up to $5,000 inc GST**

**Before you get started, please confirm you have you read the documents:**

* Streets Alive Eligibility & Guidelines
* Funding objectives
* Eligibility criteria
* Resources <https://streetsalive.org.au/resources/>

**FUNDING APPLICATION**

|  |  |
| --- | --- |
| **Applicant name:** |  |
| **Applicant role:** |  |
| **Applicant phone number:** |  |
| **Applicant email:** |  |
|  |  |
| **Organisation name:** |  |
| **Address:** |  |
| **Website or social media (optional):** |  |
| **Select organisation type:** | * Town Team * Community Group * School P&C or P&F * Community Resource Centre (CRC) * Local Government * Other, please specify |
| **ABN or AIRN (if applicable)** |  |
| **Is this organisation unincorporated:** | * Yes * No |

**AUSPICE REQUIREMENTS**

**Only answer this section if your organisation is unincorporated and/or does not have an ABN or AIRN.**

If your organisation is not incorporated or have an ABN or AIRN, you are required to nominate an auspice organisation to administer the funding on your behalf.

Please note:

* This auspice organisation must have an ABN or AIRN.
* Individual/Sole Traders are ineligible to auspice.
* Please ensure your nominated auspice organisation has agreed to support your application prior to applying for funds.
* If your application is successful, your auspice organisation will be included and required to sign the funding agreement.

|  |  |
| --- | --- |
| **Auspice organisation name:** |  |
| **Contact name:** |  |
| **Email address:** |  |
| **Phone number:** |  |
| **ABN:** |  |
| **Address:** |  |

**PROJECT TEAM**

**Please tell us who is involved in the delivery of your project?** (e.g. team members, volunteers, project partners etc.)

|  |  |  |
| --- | --- | --- |
| **Name** | **Role** | **Notes** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**How many events or projects has your organisation or project team delivered in the past?**

* + 0-5
  + 6-10
  + 11-20
  + 21+

**Please provide an example of a project or initiative that your organisation has previously delivered.** Where this is your organisation’s first project, you can demonstrate the experience of the group by including examples of relevant projects your team members have previously delivered.

|  |
| --- |
|  |

**PROJECT INFORMATION**

|  |  |
| --- | --- |
| **Project name:** |  |
| **Project town/suburb:** |  |
| **Region** |  |
| **Please describe the location that this project relates to, e.g. street(s), roads(s), path(s) or intersection(s). You can include a link or upload photos, map, drawing etc below)** |  |

1. **Tell us about the road safety issue(s) your community is facing and types or people or users who are impacted?** *Note: People or users may include residents, school children, business owners, drivers, pedestrians, cyclists, mobility scooters.*

|  |
| --- |
|  |

1. **Please select the objective(s) your project aims to achieve?** You may select more than one.
   * To build capability and capacity of local communities to deliver traffic calming and road safety initiatives in local streets and neighbourhoods
   * To change attitudes and behaviours around speed to emphasise streets for people over cars
   * To improve safety of our town centres and make them more vibrant and people friendly
2. **Please describe your project idea:**

|  |
| --- |
|  |

1. P**lease select what type of project you intend to deliver.** You may select more than one.

* Implement or trial a street calming solution(s) (e.g. planter boxes, street trees, street furniture, signage, speed bumps etc)
* Community event or workshop
* Conduct research and gather insights into local attitudes, behaviours and street improvements
* Develop project plan for a larger funding request
* Build the capability and capacity of my community and/or community group
* Other, please specify

1. **Estimated project start date:**
2. **Estimated project completion date:**
3. **Please provide an overview of your project timeline. What steps will you take to deliver this project?**

|  |  |  |
| --- | --- | --- |
| **Item or milestone** | **Date** | **Description** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Project completion |  |  |
| Submit Acquittal Report |  |  |

1. **How will you communicate your project to your community and/or local stakeholders?**

|  |
| --- |
|  |

1. **Have you discussed your project idea with your Local Government**

* Yes
* No
* Not applicable

1. **Do you think your project will require approvals from other stakeholders?** (Local Government, land owners, residents, business owners etc)
   * Yes
   * No
   * Unsure
   * If yes, please specify
2. **If your project is funded, does your organisation agree to acquire the required insurances to deliver the project?**
   * Yes
   * No

**BUDGET**

Please outline the estimated costs associated with your project:

|  |  |  |
| --- | --- | --- |
| **Item** | **Cost** | **Notes** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Total cost: | $ |  |

Note, these costs can include external consultant fees, artists fees, hire equipment, education, permits, insurance, marketing, printing and supplies costs.

**SUPPORTING DOCUMENTATION (optional)**

You can upload up to 4 supporting documents to assist us with the assessment of your application. This may include a letter of support, referee details, images, maps etc

**Application complete.**