Excellence Grants for Individuals Application Form 2024-25 Form Preview

EXCELLENCE GRANTS FOR INDIVIDUALS - APPLICATION FORM

* indicates a required field

Grant Information

To meet the policy requirements for funding applications under the Excellence Grants for Individuals Program, the following criteria must be met:

- 1. The applicant must be a resident of Knox;
- 2. The applicant has been selected or personally invited to participate in a competition or event by a National or State peak body or governing organisation of the specialized area:
- 3. The applicant has not received an Excellence Grant for Individuals in the current or previous financial year;
- 4. The competition or event has not already taken place;
- 5.The applicant has not received another grant from Knox City Council for the same competition or event;
- 6.The applicant must not have a delinquent account with Council (an amount owed to Council that was not paid by the due date);
- 7. The applicant must not have outstanding acquittal documentation from a previous Council grant;
- 8.More than two individuals from the same club/organisation have not already received funding for the same competition or event;
- 9. The applicant is not being remunerated for their participation (excluding prize money);
- 10The grant is not to be used to contribute to membership expenses; and
- 1 The competition or event does not expose Council to adverse criticism due to controversial issues (eg political or cultural sensitivities).

Application Category

11	,					
Competition / event: * O Within Victoria - \$150		○ International - \$400				
Confirm Amount Requ	ested *					
\$						
Must be a dollar amount. What is the total financial support you are requesting in this application?						
APPLICANT DETAI	LS					
* indicates a required field						
Person completing application * First Name Last Name						

This should be the parent/guardian if the competitor is under the age of 18.

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Address * Address					
Address Line 1, Suburb/To	own, State/Provin	ce, Postcode, a	nd Country are	required.	
Mobile Number *					
Must be an Australian pho	one number.				
Email *					
Must be an email address).				
Person competing in First Name	competition , Last Name	/ event *			
Is the applicant unde ○ Yes	er 18 years of	age?)		
If yes, a parent / guard details for payment of		complete the	declaration a	nd provide their ba	าk
REQUEST DETAIL	LS				
* indicates a required f	ïeld				
Request Details					
Type of Grant: * Sports and recreati Arts and culture Education Environmental and		n initiative			
Event Date *					
Must be a date.					
Describe details of t	he request: *				

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eg. description of the event, assistance with travel, accommodation, uniform or equipment purchase or hire

Supporting documentation required:

- (a) Official documentation from peak body or governing body confirming event is of State, National or International standard; AND
- **(b)** Invitation showing individual has been selected or personally invited to participate in the event; **AND**
- (c) Letter detailing proof of costs to be incurred eg airfare, accommodation, entrance fees, etc

etc	
Attach file/s: * Attach a file:	
A minimum of 3 files and a maximum of 3 files ma	y be attached.
ADDITIONAL INFORMATION	
* indicates a required field	
Has a grant been sought / provided from scheme previously? * Yes	n the Excellence Grants for Individuals ○ No
Year of Application: *	
Have other individuals from your club / this event? *	organisation already received funding for
○ Yes	○ No
Have you received another grant from K or event? *	nox City Council for the same competition
○ Yes	○ No
Do you have a delinquent account with was not paid by the due date)? * ○ Yes	Council (an amount owed to Council that
Do you have any outstanding acquittal o	locumentation from a previous Council
grant? * O Yes	○ No
Are you being remunerated for your par	ticination in the competition or event?

(This excludes prize money.) *

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○ Yes	○ No
Is the grant being used to con ○ Yes	tribute to membership expenses: * O No
DECLARATION	
* indicates a required field	
Conflict of Interest	
Are you or a family member an ○ Yes ○ No	n employee at Knox City Council? *
If yes, please provide details I	pelow
Do you or a family member ha Councillor? * Yes No If yes, please explain the natu	ve a relationship with a Council employee or
	within this application is true and correct.
	mmits to provide an acquittal of all grant funds to ellence Grants for Individuals Program Policy.
Applicant First and Last Name	*
The applicant should be the parent/gu	uardian if the competitor is under 18 years of age
Declaration Date *	
Must be a date.	

Privacy Statement

The personal information requested in this application form is for the purposes of administering the Excellence Grants for Individuals Program and will only be used by Council for that primary purpose or directly related purposes. Whilst information relating to groups

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and the specific request/project details will be published, personal information in regards to individuals will not be disclosed except as required by law.