



BARALABA MINE COMMUNITY SPONSORSHIP APPLICATION FORM

The following information is used to assess applications on their merit and contribution toward community development. *indicates a mandatory field

Have you read and understand the Community Sponsorship Program guidelines?* Yes
Does your application meet the guidelines?* Yes

Organisation Information

Organisation Name*

Organisation Physical Address*

Organisation Postal Address (if different from above)

ABN

Primary Applicant Contact Details

Primary Contact Person for Organisation*

First Name: _____ Last Name: _____

Position in Organisation*

Primary Contact Phone Number*

Primary Contact Email Address*

Secondary Contact Person for Organisation*

First Name: _____ Last Name: _____

Position in Organisation*

Primary Contact Phone Number*

Primary Contact Email Address*

Organisation Information

How long has your organisation been established?*

How many members does your organisation have?*

Project or Activity Information

Project or Activity Name*

Who will manage the project or activity?*

First Name: _____ Last Name: _____

Give a brief summary of the proposed project or activity*

What community need is being addressed by this project or activity?*

Which Baralaba Focus Area will this project address?

Who will directly benefit from this project or activity?*

Describe the expected benefit to the community the proposed project or activity will have. * (Describe 3 things you want the project to achieve in terms of benefits for participants and/or others)

How many people will benefit from this project?

Is other funding being requested or been secured for this project or activity?*

What signage or branding opportunities will be available to Baralaba through this project or activity?*(
 (Describe how you will promote Baralaba’s support)

What contribution will your organisation make to the project or activity?*

Budget Information

How much money are you applying for through this application?*

Total Project Cost*

Budget (GST Exclusive)

In the table below, we need to know where your organisation is receiving funding from for the project (e.g. local council grant, other industry grant and your own organisation’s commitment.)

Please list a breakdown of the items or services to be purchased for this project, then the amount of each item (e.g. purchase of equipment \$400, freight \$200)

Name of Organisation/s providing funding	Is funding from Column 1 confirmed?	How much is confirmed?	List items/services for project	Item/Service Cost
Example: Grant from local government. Also include amount being requested from Baralaba.	Yes or No	Amount of grant or funds available	List items to be paid for	Amount for each item
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

Quotes

Please attach all relevant quotes for the project budget

Project Implementation

Start Date*

End Date*

Please outline the steps you will take to implement this project or activity.*

Please attach any relevant documents to support the application