



Introduction Organisation **Project Information** Budget Attachments Confirmation Review My Application

Printer Friendly Version | E-mail Draft

* Required before final submission

Welcome to FRRR's ANZ Seeds of Renewal Program - Round 20 2022
Opens Tuesday 5 July 2022, closes 5pm AEST, Wednesday 3 August 2022
(For projects December 2022 - November 2023)

Tips for using the ANZ Seeds of Renewal online application form:

- To assist in managing versions and to reduce the risk of losing work if an internet connection times out, we recommend preparing your application content in a Word document and then transferring your final application content to this Grants Gateway form. Please [click here](#) for a print friendly version of this application form.
Working offline also makes it easier for multiple people to work on an application before entering your application into Grants Gateway for submission.
- Remember to continually save your work in the online form as you move through the sections.
- Please refer to the ANZ Seeds of Renewal Guidelines for further tips and information to support you to complete the application.**
- As always, if you require assistance to complete this online application form, the friendly FRRR staff are only a phone call away on Grants enquiries 1800 170 020.

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ANZ Seeds of Renewal Program

How to complete this section:

****Does your organisation, the group delivering the project, have an ABN or Inc number?**

If **YES**, please complete part:

- A. Legal organisation - provide information about **your local group**
- B. Delivery organisation - leave this blank

If **NO**, please complete part:

- A. Legal organisation - provide information about **the organisation partnering with your group / your head office / governing body**
- B. Delivery organisation - provide information about your local group

A. Legal Organisation

Organisation - Name and Address

* What is the legal name of the organisation?

* Postal address Line 1

Postal address Line 2

* Town * State * Postcode

Organisation - Legal & Tax Status

Please click on this link from the Australian Government ABN Lookup site to complete the following organisation details [ABN Lookup](#)

* Is your organisation registered with an ABN?	Organisation ABN Format: XX XXX XXX XXX
<input type="checkbox"/>	<input type="text"/>
* Select Organisation Entity type, as per your ABN Lookup	Is the organisation registered for GST?
<input type="checkbox"/> - Select One -	<input type="checkbox"/>
* Does your organisation hold any of the following? Select all that apply.	
<input type="checkbox"/> ACNC <input type="checkbox"/> DGR1 <input type="checkbox"/> DGR2 <input type="checkbox"/> DGR4 <input type="checkbox"/> TCC <input type="checkbox"/> N/A	
* Is your organisation an Incorporated Association?	If yes, what is the Incorporated Association number?
<input type="checkbox"/>	<input type="text"/>
If yes, which State / Territory authority is your organisation registered with?	
<input type="checkbox"/> <None>	

Organisation - Head of Organisation

These contact details should reflect the person who is the head of the organisation (e.g Chair, President, CEO) as they MUST authorise the application, NOT a subcommittee Chair, Secretary, Treasurer or Program Manager.
Important: Our correspondence regarding the outcome of your application will be sent here. If your application is successful, we will request Electronic Funds Transfer information from the contact listed here.

* Title	* First name	* Last name
<input type="checkbox"/> - Select One -	<input type="text"/>	<input type="text"/>
* Position held		
<input type="text"/>		
* Bus. Hrs Phone No. Format: XX XXXX XXXX	* Mobile No. Format: XXXX XXX XXX	* Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

Organisation - Project Contact

This person will be contacted if we have any questions about your project / application.

Title	First name	Last name
<input type="checkbox"/> - Select One -	<input type="text"/>	<input type="text"/>
Position held		
<input type="text"/>		
Bus. Hrs Phone No. Format: Format: XX XXXX XXXX	Mobile No. Format: XXXX XXX XXX	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

Organisation - Overview

* In what year was your organisation founded?	* Current number of employed staff
<input type="text"/>	<input type="text"/>
* Current number of volunteers	* Current number of committee members
<input type="text"/>	<input type="text"/>

Provide a brief overview of your organisation.
If you do not have a website, please provide a brief overview of your organisation. Mission, major programs / activities, users of your facilities, engagement with other community groups, key partnerships.

Organisation - Internet & Social Media

FRRR would like to link with your organisation through social media. Can you please provide us with the following, where applicable.

Website Address

Facebook Address

Twitter Handle

Important: Only complete Part B if you are partnering with an organisation who will receive and hold grant funds.

B. Delivery Organisation

Delivery Organisation - Name & Address

Organisation name

Postal address Line 1

Postal address Line 2

Town

State

Postcode

Delivery Organisation - Overview

In what year was your organisation founded?

Current number of employed staff

Current number of volunteers

Current number of committee members

Provide a brief overview of your organisation.

If you do not have a website, please provide a brief overview of your organisation. Mission, major programs / activities, users of your facilities, engagement with other community groups, key partnerships.



Delivery Organisation - Social Media Details

FRRR would like to link with your organisation through social media. Please provide us with the following, where applicable.

Website Address

Facebook Address

Twitter Handle

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Project Information

What, why, when, where, who and how of your project.

* Project Title

* Project Summary

Please provide a summary of the key aim/s of your project and what the funds will be used for.

Word count 0 of 50

Please nominate your nearest ANZ branch.

ANZ Staff volunteer opportunities

Please indicate if your organisation is located less than one hour travel by car from the nearest ANZ branch and would be interested in hosting an ANZ staff as volunteers for a day. FRRR notes that answering 'No' will not negatively affect our assessment of your application.

Project Activity Area

FRRR needs your help to better understand the issues communities plan to tackle with the support of an FRRR grant. This is important information for us, in reporting back to our donor partners and in building the case for more support. Please follow the three steps below to identify your Project Activity Area.

1. Identify Project Activity Area. To do this click on [Project Activity Tree](#) and follow the instructions on page one.
2. Select your activity area from the list below. Please note the Project Activity Tree is limited to three sections for this Grant Program.

*

- 3 Acting on environmental challenges / opportunities
- 6 Building economic strength & sustainability
- 7 Promoting individual & community health & social wellbeing

* **WHAT** will you do? Tell us about your project.

What is your project and how does it relate to: improving environmental sustainability, financial wellbeing within the community, access to housing, or enabling your community to thrive? What is the aim of your project? What will you actually do? What exactly will the FRRR funds pay for? What are the key activities that will be undertaken?

Please note that projects cannot be funded retrospectively.

*** WHY is the project needed?**

What is the current problem / need / opportunity that your project seeks to address? What is contributing to this problem / need in the community? To what extent is the problem affecting the community? What local evidence and / or data demonstrates this? You can upload support materials such as letters of support, community plans/data, survey results, media clips, photos etc to help demonstrate need in the Supporting Materials section.

WHEN will your project happen?

Provide exact or approximate start and end dates for your project, including when key activities will happen. Please ensure you are aware of funding cut off dates found in the [guidelines](#) or on the FRRR website. Please note that projects cannot be funded retrospectively.

WHERE will your project happen?

Please tell us the following information about where your project will happen. For projects happening in more than one location, please indicate these in rows 2-4. If your project is happening nationally please place "National" under Town Name.

e.g. Collie → NSW → 2827 → 109

* Town	* State	* Postcode	* Population
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="▼"/>	<input type="text"/>	<input type="text"/>

Which Local Government Areas will this project cover?

Select, up to 4 Local Government Areas.

*** Please follow the two steps below to identify the Local Government Area(s) for the Project location(s) listed in the previous question.**

1. Type in the Local Government Area into the search box and click search.
2. Select the Local Government Area from the drop-down menu.

Search Reset

- Select One - ▼

Search Reset

- Select One - ▼

Search Reset

- Select One - ▼

Search Reset

- Select One - ▼

* Briefly describe the main features of the community / communities where your project will occur.

e.g. demographics, employment, community activities, key clubs and organisations, economics, community & cultural diversity, festivals / events etc

* **WHO** will benefit and be involved?

Who will benefit in the community (i.e. the broader community or a specific target group)? How are they affected by the issue? How will the people who benefit be involved in the development and delivery of the project? Who else (partners, community members etc) will be involved and why are they best placed to support the project? What is the approximate number of people that will directly benefit?

Where relevant, please select the **most appropriate target group** options below:

Age Group

- Children (0-4)
- Children (4-12)
- Young people (12-24)
- Adults (25-59)
- Older people (60+)
- All Ages

Gender

- Female
- Male
- All Genders
- Gender Neutral

* Does your project involve working directly with children / youth under 18?

* Does your organisation have policies and procedures regarding working with children, Working with Children Checks, and the handling of child abuse complaints?

HOW will your project benefit the community?

* Select ONE option that best describes **HOW** your project will create change

- Investing in Infrastructure and Equipment
- Building Organisational Capacity
- Developing Awareness, Knowledge and Skills
- Providing Access to Services / Activities

* Please identify the project's primary outcomes. (you can tick up to three)

FRRR needs your help to better understand and track the outcomes of FRRR grants in rural, regional and remote communities around Australia. This is important information to support FRRR to report back to our donor partners and build evidence for more support.

- Communities that can innovate or respond to local opportunities / issues
- Greater ability to deal with / respond to individual / community level challenges
- Stronger local economies
- Improved financial security / reduced poverty or financial stress
- Enhance community identity / wellbeing / sense of place
- A friendly and inclusive community / stronger social fabric
- Promote environmental health / sustainability
- More creative / culturally vibrant communities
- More engaged / participative community
- Optimal start in life for children, starting school ready to learn
- Increased engagement in learning and improved education outcomes
- Stronger individual and / or community resilience

* Briefly describe the project's expected outcomes?

How will your project improve environmental sustainability, financial wellbeing within the community, or access to housing? What will the project achieve and how will things be different because of this project? How will you know if the project has achieved its aims? How will you know if those involved are satisfied with the outcomes? How do you plan to share the outcomes, knowledge and experiences of your project? If this funding is used to support a larger / more complex project, how will you measure and evaluate outcomes.



Disaster or Emergency Response

* Does your project relate directly to preparedness for or recovery from natural disasters, emergency management, or drought?


If yes to the above Disaster or Emergency Response Projects question, please select which best describes the focus of your project.
If no to the above question, please select Non-Emergency / Disaster Response.

* Required before final submission

Project Budget

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)


Income - FRRR Request & Your Contribution
 Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

* Total project cost * Amount requested from FRRR  * Does the amount requested cover the full project cost?

Cash contribution from your organisation

Income - Cash contribution from other sources
 Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

Who and What e.g. Name of organisation or fundraising activity. Other funding from local or state government	Amount whole dollars only	Confirmed Yes/No
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>
<input type="text"/>	<input type="text"/>	<input type="button" value="v"/>

Total Cash contribution from other sources Click to calculate 
 0

Expenditure

e.g. Provide a description of project expenses - "Kitchen materials (oven \$798; Sink \$279; Dishwasher \$603)" "Amount - 1680"

Where possible, upload quotes for items over \$1,000 in the Quotes area below. If quotes are not available for items over \$1,000, please provide rationale for expenditure amount in the Description section.

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

Expenditure item

Description

Amount

Whole dollars only

Total Cash Expenditure

Click to calculate

0

In-kind Contributions

Include an estimated value for non-cash contributions such as services, equipment, time and materials.

For services provided by volunteers, please cost their services at \$41 per hour.

Please enter whole dollars and numbers only (no commas, decimal points or \$ signs)

In-kind Support – Who

In-kind Support – What

Amount

Whole dollars only

Total In-kind Contributions

Click to calculate

0


Additional information or comments regarding In-kind Contributions.



Budget Summary


Total Project Income

Total (FRRR request + Organisation cash contribution + Other cash contribution + In-kind contribution)

Click to calculate
0 


Total Project Expenditure

Total (Cash Expenditure + In-kind Contribution)

Click to calculate
0 


Balance - Total Income less Total Expenditure

Please note: Total expenditure must equal total income therefore balance should be zero.


Click to calculate
0 

Quotes


Upload and attach copies of quotes, where possible for items over \$1,000. Please note files can be no larger than 10MB.

Attach expenditure quotes here. 
Browse for the document and upload here


Browse...

Additional expenditure quotes 
Browse for the document and upload here

Browse...

Additional expenditure quotes 
Browse for the document and upload here

Browse...

Additional expenditure quotes 
Browse for the document and upload here

Browse...

* Required before final submission

Please attach the following documents for this application below

Partnering Organisation Letter of Support

Organisations that are partnering with another group responsible for receiving and holding the grant funds, or organisations that are branches of a head organisation and do not have their own ABN, **must** attach a Letter of Support for this project from the partnering organisation.

Letter of support:

Browse for the document and upload here. Please note files can be no larger than 10MB.

Browse...

Upload

Financial Attachments

Legal Organisation Financials (the organisation associated with this application who have an ABN or Incorporation number)

Please read the following carefully:

- * **For organisations who have audited financials:** Attach the most recent annual audited statements.
- For organisations that do not have audited financials:** Attach most recent 12 months Income and Expenditure Statement. If you have a Balance Sheet, please also submit.
- For organisations less than one year old:** Provide bank statements for the period you have been operating. [i](#)

Browse for the document and upload here. Please note files can be no larger than 10MB.

Browse...

Upload

Browse for the document and upload here. Please note files can be no larger than 10MB. [i](#)

Browse...

Upload

Browse for the document and upload here. Please note files can be no larger than 10MB. [i](#)

Browse...

Upload

We assess your financial documentation to confirm that you are able to deliver the grant project. Where relevant, please provide a brief explanation of any large financial surplus, or current assets and tell us why FRRR funds are still required. If relevant, please explain any deficits and steps to sustain the organisation financially.

Support Materials

Support materials to support evidence/need for project This can include project plans, community surveys, media clips, letters of support, other local material to support need for your project.**(HIGHLY REGARDED)** ⓘ
Browse for the document and upload here. Please note files can be no larger than 10MB.

Additional support materials

Please use the following attachment box to upload more support materials. ⓘ
Browse for the document and upload here. Please note files can be no larger than 10MB.

Additional support materials

Please use the following attachment box to upload more support materials. ⓘ
Browse for the document and upload here. Please note files can be no larger than 10MB.

Additional support materials

Please use the following attachment box to upload more support materials. ⓘ
Browse for the document and upload here. Please note files can be no larger than 10MB.

Photos ⓘ

Browse for the document and upload here. Please note files can be no larger than 10MB.

Additional Photos ⓘ

Browse for the document and upload here. Please note files can be no larger than 10MB.

Please use the box below if you would like to provide further information or context on any of your attachments (such as financials, support materials, photo's).

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Application Confirmation Statement

To be endorsed by the Legal Entity Organisation for this project.

I confirm that this application is made with the knowledge and approval of the legal head of the organisation, and endorse this application and agree to the following conditions:

- Acknowledge and understand that this application will become the property of FRRR and ANZ and that it may be provided to other funders;
- Provide permission for FRRR and ANZ to contact them in relation to this application;
- Agree to inform FRRR if the organisation has a significant change to its governance and/or financial situation;
- Agree that if successful, to provide banking details to FRRR within two weeks of receiving notification of the grant;
- Agree that if successful, to expend funding within 12 months as per the terms in the [Grant Conditions](#);
- Agree for FRRR and ANZ to publish written content provided by me in this Application, and agree to the terms of the [Photo and Audio Release](#) for any attachments I have uploaded.

* I have read and agree to the above

* Name of authorised person completing this certification

* Position

* Date

