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## Welcome to FRRR's Community Led Climate Solutions Round 3 2025 **Stream 2 Scaling Grants Expression of Interest**

Closes 5pm AEST Thursday 22 May 2025

#### Tips for using the 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 Community Led Climate Solutions 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 Grant enquiries 1800 170 020.

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# **Community Led Climate Solutions**

#### 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
- - 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
Organisation - Legal & Tax Status  Please click on this link from the Australian Government A	ABN Lookup site to complete the following organisation details ABN Lookup
* Is your organisation registered with an ABN?	Organisation ABN
* Select Organisation Entity type, as per your ABN Lookup Please select No ABN - N/A if your organisation does not have an ABN.  - Select One -	* Is the organisation registered for GST?
<ul> <li>* Does your organisation hold any of the following? Sometimes</li> <li>□ ACNC</li> <li>□ DGR1</li> <li>□ DGR2</li> <li>□ DGR4</li> <li>□ TCC</li> </ul>	
* Is your organisation an Incorporated Association?	If yes, what is the Incorporated Association number?
* If yes, which State / Territory authority is your organisation Please select N/A if not registered	registered with?

- Select One -	•		
Organisation - Head	of Organisation		
NOT a subcommittee Important: Our corre	Chair, Secretary, Treasurer or Program	m Manager.	C, CEO) as they MUST authorise the application,
* Title - Select One - •	* First name	* Last name	
* Position held			
* Bus. Hrs Phone No.	* Mobile No.		
Organisation - Projec		/amplication	
Title	d if we have any questions about your project /	Last name	
- Select One - 🗸	riistiidille	Last Harrie	
Position held			
Bus. Hrs Phone No.	Mobile No. Email		
Organisation - Overv	iow		
		nt number of analous distaff	
• In what year was you	r organisation founded?	nt number of employed staff	
* Current number of vo	olunteers <b>*</b> Curre	ent number of committee members	
		organisation. Mission, major programs / activities, use	ers of your facilities, engagement
with other community gr	oups, key partitersinps.		
			and to growing and improving our funding in this area. To do tions communities are First Nations owned and controlled.
	that applies to your organisation:		
		t Islander people (with 51% or more Aboriginal a	nd/or Torres Strait Islander governing body (Directors).
	-	s Strait Islander people, communities and/or orga	nisations.
_	ed by Aboriginal and/or Torres Strait Islan I and/or Torres Strait Islander-led and cor er		
Organisation - Intern FRRR would like to link		I media. Can you please provide us with the f	ollowing, where applicable.
Website Address	-	ook Address	
Twitter Handle			

Important: Only complete Part B if you are partneri	ing with an organisation who will receive and hold grant funds.
B. Delivery Organisation	
Are you partnering with an organisation that will re If so, you will need to provide a letter of support if y	
Delivery Organisation - Name & Address	
Organisation name	
Postal address Line 1	
Postal address Line 2	
Town	State Postcode V
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 with other community groups, key partnerships.	of your organisation. Mission, major programs / activities, users of your facilities, engagement
	n of Aboriginal and/or Torres Strait Islander peoples, and to growing and improving our funding in this area. To do ants working with, or delivering projects with First Nations communities are First Nations owned and controlled.
Please select the option that applies to the delivery organisat  None	tion:
$\bigcirc$ Is controlled and operated by Aboriginal and/or Torn	
Delivery Organisation - Social Media Details	the control modile. Disease provide us with the fall and a substantial state of the control of t
Website Address	th social media. Please provide us with the following, where applicable.  Facebook Address
Twitter Handle	

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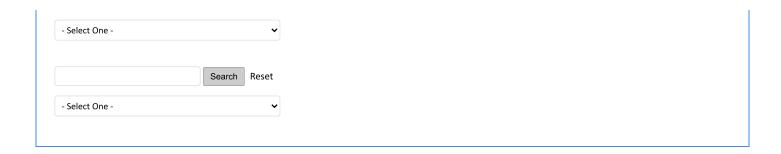
Pr	oject Information
Ρ	roject Title
۷	rovide a brief outline of your Community Led Climate Solutions Project. 'hat do you intend to do?
	ote: if your project involves improvements to land or buildings, please state who the owner of the project is. If you are the owner please state this. If you are not the owner, you will need ovide written confirmation of the owners permission if invited to full application.
٧	ford count 0 of 300
	ow do you understand the need/demand from your community?
٧	/ill your organisation be partnering with an Aboriginal and/or Torres Strait Islander organisation(s)/community(ies) to deliver your project?
	○ Yes ○ No
	○ NO  We are an Aboriginal and/or Torres Strait Islander-led and controlled organisation
H	Yes to the previous question, please name organisation(s)/community(ies).

- \* Your Community Led Climate Solutions Scaling Project must deliver on each of the following objectives:
  - Scale an existing locally-led project to a more mature state;
     Directly alleviate socioeconomic disadvantage;

  - Evidence this is an appropriate solution to a demonstrated risk or impact of climate change; AND
  - Improve the capacity of the local community to take an active role, or lead, in the mitigation or adaptation of climate change.

Please outline below how you will address each objective.

* Amount requested from FRRR				
<ul><li>Please list the project's expen</li></ul>	se items and specify whi	ch items the FRRF	grants funds will be used for.	
			oroval, you will need to provide proof of the approval if invited to full	application.
* WHEN will your project happe	en?			
(This project must be able to I	be delivered with 18 mor and end dates for your projec	ct, including when ke	activities will happen. Please ensure you are aware of funding cut off	dates found in the
Trogram Guidelines of on the Film	( Website. Trease note that pr	ojecto camilot de Tani	a renospectively.	
WHERE will your project happ Please tell us the following inf		our project will h	open. For projects happening in more than one location, p	ease indicate these in rows 2-4.
e.g. Windorah $\rightarrow$ QLD $\rightarrow$ 4481	1 → 104			
* Town	* State	* Postcode	* Population	
	•			
	•			
	•			
Which Local Government Area Select, up to 4 Local Government Area	226			
* Please follow the two steps be  1. Type in the Local Gover			(s) for the Project location(s) listed in the previous questio	٦.
2. Select the Local Govern				
	Search Reset			
- Select One -	•			
	Search Reset			
- Select One -		•		
	Search Reset			



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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 that it may be provided to other funders;
- 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 18 months as per the terms in the Grant Agreement;
- Agree that FRRR can 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 30/04/2025

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Review & Submit