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\* Required before final submission

## Welcome to FRRR's Community Led Climate Solutions - Round 3 2025

Opens Thursday 1 May 2025, closes 5pm AEST, Thursday 26 June 2025  
(For projects October 2025 - October 2026)

### 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

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

\* Is the organisation registered for GST?

\* Select Organisation Entity type, as per your ABN Lookup

Please select **No ABN - N/A** if your organisation does not have an ABN.

\* Does your organisation hold any of the following? Select all that apply.

☐ ACNC ☐ DGR1 ☐ DGR2 ☐ DGR4 ☐ TCC ☐ N/A

\* Is your organisation an Incorporated Association?

If yes, what is the Incorporated Association number?

\* If yes, which State / Territory authority is your organisation registered with?

Please select **N/A** if not registered

## Organisation - Financials

**Legal organisation financials** (the organisation associated with this application who has an ABN or Incorporation number).

Please provide the following information regarding the legal organisations's financial situation\*:

For groups with less than 12 months of operation, please provide information on the organisation's current income and expenditure.

\* Annual Income

\* Annual Expenditure

\* Current Assets

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.

## 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

\* Position held

\* Bus. Hrs Phone No.

\* Mobile No.

\* Email

## Organisation - Project Contact

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

Title

First name

Last name

Position held

Bus. Hrs Phone No.

Mobile No.

Email

## 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.

\* FRRR is committed to supporting self-determination of Aboriginal and/or Torres Strait Islander peoples, and to growing and improving our funding in this area. To do this, we require information about whether applicants working with, or delivering projects with First Nations communities are First Nations owned and controlled.

Please select the option that applies to your organisation:

- ☐ Is controlled and operated by Aboriginal and/or Torres Strait Islander people (with 51% or more Aboriginal and/or Torres Strait Islander governing body (Directors).
- ☐ Operates for the primary benefit of Aboriginal and/or Torres Strait Islander people, communities and/or organisations.
- ☐ Has been established by Aboriginal and/or Torres Strait Islander people.
- ☐ Is not an Aboriginal and/or Torres Strait Islander-led and controlled organisation.
- ☐ Prefer not to answer

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.

FRRR is committed to supporting self-determination of Aboriginal and/or Torres Strait Islander peoples, and to growing and improving our funding in this area. To do this, we require information about whether applicants working with, or delivering projects with First Nations communities are First Nations owned and controlled.

Please select the option that applies to the delivery organisation:

- ☒ None
- ☐ Is controlled and operated by Aboriginal and/or Torres Strait Islander people (with 51% or more Aboriginal and/or Torres Strait Islander governing body (Directors).
- ☐ Operates for the primary benefit of Aboriginal and/or Torres Strait Islander people, communities and/or organisations.
- ☐ Has been established by Aboriginal and/or Torres Strait Islander people.
- ☐ Is not an Aboriginal and/or Torres Strait Islander-led and controlled organisation.
- ☐ Prefer not to answer

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

### \* Project Title

### \* Project Summary

Please provide a summary of the key aim/s of your project.

Use the following example to help write your summary including the key Program objective your project aligns to (from below) and why funds are needed?

1. Drive engagement, education, and leadership in remote, rural, and regional climate solutions;
2. Activate locally-led opportunities to advance: the energy transition, climate adaptation, decarbonisation, and circular economies;
3. Support just transitions to new clean economies for thriving communities.

The *[name of project]* will *[activity aligned with one of the above objectives]* to address *[main issues/problems/needs/opportunities]* for the purposes of benefitting *[target group, organisation, community]*. It will bring about *[key changes, achieved by your project]*. Our organisation can achieve this objective because we *[describe unique organisational strengths/position to tackle the issues/problems/needs/opportunities]*.

Word count 0 of 300

### \* WHAT will you do?

Please detail the project activity including its alignment to the grant purpose of reducing greenhouse gas emissions and helping to address the impacts of Climate Change for positive and sustainable environmental, social and economic outcomes.

### \* Community Led: Please explain how your project is Community Led including how it addresses community priorities; information on who is involved and any relevant partnerships; how the broader community will be engaged and supported to participate and ways of working that ensure equity and inclusivity.

### \* WHY is the project needed?

What is the current climate problem/need/opportunity that your project seeks to address in your community? What local circumstances, evidence or data are you basing your project on? Do you have appropriate permissions/approvals or stakeholder engagement to deliver the project as described?

- \* Will your organisation be partnering with an Aboriginal and/or Torres Strait Islander organisation(s)/community(ies) to deliver your project?
- ☐ Yes
- ☐ No
- ☐ We are an Aboriginal and/or Torres Strait Islander-led and controlled organisation

If Yes to the previous question, please name organisation(s)/community(ies).

- \* **WHEN** will your project happen?
- Projects **must be implemented** in the 12 months following the announcement of successful grants. 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 funds 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.  
e.g. Windorah → QLD → 4481 → 104

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

▼

- Select One - 

\* Describe the features of the community/ies where your project will occur that are **relevant** to the Program objectives, and how you will ensure the project is inclusive and will provide just outcomes?

Are local First Nations people engaged with your project? If so how?

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

\* **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 projects expected outcomes?

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? (impact or outcomes measurement)

Describe specific systemic challenges or potential barriers to achieving your outcomes and any mitigation strategies?

\* **Skilled Volunteering**

FRRR has a network of corporates with expertise that might support your project. Please indicate if you would be interested in exploring this opportunity. FRRR notes that answering 'No' will not negatively affect our assessment of your application.

▼

If you answered 'Yes' to the above question, please describe the sort of skilled volunteering assistance you would be interested in?

Is there any further information about the project or your organisation that you would like to share?

### 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 answer question below.  
Which of the following best describes the focus of your project:

If **no**, to above Disaster or Emergency Response Projects question, please select **Non-emergency / Disaster Response**.

- ☐ Emergency / disaster preparedness
- ☐ Longer term post-emergency / disaster recovery
- ☐ Non-emergency / Disaster Response

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## Project Budget

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

### Income - FRRR Request & Your Organisation's 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

















Total Cash contribution from other sources

Click to calculate

0.00 

### 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.

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

#### Expenditure item


Description

#### Amount

Whole dollars only

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Total Cash Expenditure

Click to calculate  
0.00 


What will the FRRR funds pay for specifically.

**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 \$45 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
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Total In-kind Contributions


Click to calculate  
0.00 

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  
0.00 


Total Project Expenditure

**Total** (Cash Expenditure + In-kind Contribution)

Click to calculate  
0.00 


**Balance - Total Income less Total Expenditure**

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

Click to calculate  
0.00 

**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. 

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.


No file chosen

Additional expenditure quotes 

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.


No file chosen

Additional expenditure quotes 

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

Additional expenditure quotes 

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

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## 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 **must** attach a Letter of Support for this project from the partnering organisation.

A letter of support template is available [here](#). This can be used as a guide.

Letter of support:

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

### Photos

A requirement of this application process is a high resolution photo (between 1MB to 10MB). The photo can be a group shot of staff or volunteers in your Community Organisation OR an action shot relevant to the project you are applying for including people.

If you are successful, FRRR may utilise this photo in grant announcements and/or associated communications.

### \* Photos

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

### Additional Photos


Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

### Support Materials

#### Financial Documentation

Please provide a copy of audited financial records not older than 18 months old. If your organisation is less than 12 months old provide copies of bank statements for your operating period. See [guidelines](#) for more detail 

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.

Please note, files **cannot** be larger than 10MB.

No file chosen

#### Property Ownership

If your project involves improvements to land or buildings not owned by your organisation, please provide written confirmation from the owner of the land and/or buildings, noting 1) their ownership and 2) their approval for the works described in this application.

A property ownership letter template is available [here](#). This can be used as a guide.



Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

Constitution

If your organisation is registered with the ACNC or is unincorporated, please upload a copy of your Constitution. ⓘ

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

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)**

Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

Additional support materials ⓘ

Please use the following attachment box to upload more support materials.  
Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

Additional support materials ⓘ

Please use the following attachment box to upload more support materials.  
Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

Additional support materials ⓘ

Please use the following attachment box to upload more support materials.  
Select **Choose file** to browse and locate the document. Once located, select **Upload** to load the document to the form.  
Please note, files **cannot** be larger than 10MB.

Choose File

No file chosen

Upload

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 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 12 months as per the terms in the [Grant Conditions](#);
- 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 certification

\* Position

\* Date  
 

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