



Introduction Organisation Project Information Budget Attachments Confirmation Review My Application

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Welcome to FRRR's Strengthening Rural Communities Program

Applications are accepted all year round.

Tips for using the Strengthening Rural Communities 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 [Strengthening Rural Communities 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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Strengthening Rural Communities 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

Legal Organisation - Name and Address

* What is the legal name of the organisation?

* Postal address Line 1

Postal address Line 2

* Town

* State

- Select One -

* Postcode

Legal 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

* Select Organisation Entity type, as per your ABN Lookup

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

Is the organisation registered for GST?

* 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?

Organisation - Financials

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

Please provide the following information regarding the legal organisation'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

(from your audited financials or bank balance)

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 describe any deficits and steps being taken to sustain the organisation financially.

Legal 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

Legal Organisation - Project Contact

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

Title - Select One - ▼	First name <input type="text"/>	Last name <input type="text"/>
Position held <input type="text"/>		
Bus. Hrs Phone No. <input type="text"/>	Mobile No. <input type="text"/>	Email <input type="text"/>

Legal Organisation - Overview

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

Provide a brief overview of your organisation.

For example: mission / purpose, major programs / activities.

Word count 0 of 400

Legal 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 <input type="text"/>	Facebook Address <input type="text"/>
Twitter Handle <input type="text"/>	

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 <input type="text"/>		
Postal address Line 1 <input type="text"/>		
Postal address Line 2 <input type="text"/>		
Town <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>

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.

For example: mission / purpose, major programs / activities.

Word count 0 of 400

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:

The *[name of project]* will address *[main issues/problems/needs/opportunities]* for the purposes of benefitting *[target group/organisation/community]*. The project will *[description of activities]*.

These will bring about *[key changes achieved by your project]*. Our organisation can address these challenges because we *[describe unique strengths/position to tackle the issues/problems/needs/opportunities]*.

Word count 0 of 200

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.

✖

- ☐ 1 Building Community Resilience
- ☐ 2 Developing Organisational Resilience & Capacity
- ☐ 3 Acting on environmental challenges / opportunities
- ☐ 4 Contributing to a culturally vibrant community
- ☐ 5 Supporting lifelong learning, education and / or training
- ☐ 6 Building economic strength & sustainability
- ☐ 7 Promoting individual & community health & social wellbeing

✖ **What will you do? Tell us about your planned project, program or service you are seeking funds for.**

Note: If your project involves improvements to land or buildings, please state who the owner of the property is. If not owned by your organisation, we need written confirmation that you have the owner's permission. If your organisation is the owner, please state this.

✖ **How have you involved your community in this project and what other groups or organisations are you working with?**

✖ **How do you know there is a need for your project?**

Why does your community/organisation need this project to respond to the impacts of COVID-19? What will happen if the project does not occur? Can you provide evidence or data that demonstrates this? Please attach materials such as letters of support, community plans / data, survey results, media clips, photos etc to help demonstrate need in the Supporting Materials section.

* What difference are you hoping your project will make to your community?

Which of the Rebuilding Regional Communities program objectives will your project achieve and how? How will you know if your project has been successful?

When will your project happen?

Please provide expected start and end dates for your project, including when key activities will happen. Please be aware of the key dates found in the [guidelines](#).

Please note 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 -

▼

Your project is not required to focus on the impacts of disasters. However, if it does there's a chance that it could open up opportunities to secure funding through different grant streams.

* Has your community been impacted by a natural disaster/s?

If yes to the above question, which natural disaster/s?

How does this project respond to the impact of the disaster/s and / or help your community be better prepared for future disaster/s?

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

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?

* 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

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Project Budget


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

Project Income

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

Income item

Amount requested from FRRR

* Amount 

Amount your Organisation will contribute

Confirmed

Click here to enter Other funding sources. e.g. the Name of organisation or fundraising activity

Click here to enter Other funding sources. e.g. the Name of organisation or fundraising activity


Click here to enter Other funding sources. e.g. the Name of organisation or fundraising activity

Click here to enter Other funding sources. e.g. the Name of organisation or fundraising activity

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Click here to enter Other funding sources. e.g. the Name of organisation or fundraising activity

Total Cash Income

Click to calculate
0.00 

Expenditure

Provide a list of project expenses - e.g. "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	Amount
Description	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 Cash Expenditure	Click to calculate 0.00

What will FRRR funds pay for?

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
<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.

Choose File

No file chosen

Upload

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.

Choose File

No file chosen

Upload

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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.

Choose File


No file chosen

Upload

Support Materials

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.


Letter of support from property owner 

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

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.

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, photos).

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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 this certification

* Position

* Date



[Save & Finish Later](#)

[Review & Submit](#)