

2026/27 Application Form - Annual Community Grants

Form Preview

Eligibility Conditions

* indicates a required field

Confirmation of Eligibility

All applicants must meet the following eligibility criteria:

- Be a not-for-profit, incorporated association with an Australian Business Number (ABN) or similar legal entity or be auspiced by an incorporated organisation that can manage the grant on the applicant's behalf including:
 - Being based in Bayside or deliver services that benefit Bayside residents
 - Have a membership wholly or substantially made up of Bayside residents and/or
 - Submit a proposal that clearly benefits the Bayside community
 - Be financially solvent
- Hold current public liability insurance appropriate to the proposed activity or program, with a minimum cover of \$20 million
- Comply with the Victorian Child Safe Standards and provide a Child Safeguarding Policy or statement if children attend your initiative
- Have acquitted all previous Council grants by their due dates and have no outstanding debts to Council.

Grants will not be provided to:

- Individuals
- For initiatives part of the school curriculum or responsibility of the State or Australian government
- Business or commercial enterprises
- Electronic gaming machine operators
- Organisations that have an outstanding debt to Council or have not satisfactorily acquitted a previous grant
- Community Centres and Neighbourhood Houses that have an existing funding and service agreement with Council (these organisations may only apply as an auspicing body for another group or organisation).

Further information on the Annual Community Grants can be found below:

www.bayside.vic.gov.au/communitygrants

[Council Grants Policy 2026](#)

Information on acquittals and eligibility please contact Councils Community Grants Officer at grants@bayside.vic.gov.au or on 9599 4787.

Please confirm you have read the above. *

- Yes
- No

1. Details of your Organisation

* indicates a required field

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Name of group/organisation *

Organisation's Website (if applicable)

Must be a URL.

Email (organisation or group email address) *

Does the organisation operate from a Council facility or building? *

- Yes
 No

Address from which the organisation operates

Address

Suburb State Postcode

Must be an Australian post code

Other location

Organisation/group type? *

- Art/Cultural
 Environmental
 First Nations
 Disability
 LGBTIQ+
 Preschool & Early Years
 Seniors
 Service Club
 Sport and Recreation Club/Association
 Youth

Tick one box only.

What is the purpose of the group/organisation? *

Word count:

Maximum 30 words

Is the organisation registered as a not for profit organisation? *

- Yes - Please provide proof uploading your organisation's Certificate of Incorporation and Australian Business Number (ABN) below.

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No - You are ineligible to apply unless you are supported by an AUSPICE who is registered as a not for profit organisation with an Australia Business Number (ABN) and can manage the funds on your behalf (see section 8 Auspice Organisation details)

Upload Certificate of Incorporation. *

Attach a file:

Please provide the organisations Australian Business Number (ABN)? *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN

2. Contact person for enquiries about your application

* indicates a required field

Name *

Title

First Name

Last Name

Position held *

Phone Number (BH) *

Email *

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Must be an email address

3. Insurance and Annual Financial Statement

* indicates a required field

Does the organisation have Public Liability Insurance cover appropriate to the activity and dates for your proposed initiative (this is required to be eligible). *

- Yes
 No

If yes, please state the amount of cover (a minimum of \$20 million is required) *

Attach the organisations Public Liability Certificate of Currency. *

Attach a file:

Attach the organisations most recent annual financial statement *

Attach a file:

Information on your governance structure eg Committee or Board terms of reference or membership

Attach a file:

4. Proposal Details

* indicates a required field

Proposed Initiative

Name of initiative *

Word count:

Maximum 10 words. This title will be used on all council documents so please be as clear and concise as possible.

Funding Requested (No more than \$12,000) *

Short initiative summary *

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Word count:

This description will be copied and published for promotion, reporting and grant agreement purposes - please be as clear and concise as possible.

Which Priority Population Groups is the initiative designed for? *

- First Nations People
- People with Disability
- Older People
- Young People
- LGBTIQ+ communities
- People from culturally and linguistically diverse backgrounds
- Carers
- People experiencing housing insecurity and homelessness
- People who have experienced trauma particularly adverse childhood experiences
- Single parent families
- Other:

Initiatives that support one or more of Council's priority populations will score higher in the assessment process.

Where will the program take place? *

- All of Bayside Community
- Beaumaris
- Black Rock
- Brighton
- Brighton East
- Cheltenham
- Hampton
- Hampton East
- Highett
- Sandringham
- Other:

At least 1 choice and no more than 11 choices may be selected.

Selection Criteria

The selection panel will assess the initiative using the information from the following questions. Please see Community Grants Program Guidelines for detailed assessment criteria and weighting on page 8

40% Describe how the initiative contributes to the goals and strategic objectives of Councils Health and Inclusion Plan 2025-2029? What are the benefits for the community? How is the initiative accessible for priority populations and what barriers does it address? Which priority population groups? *

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Word count:

Maximum 200 words. Priority Population are identified in Councils Health and Inclusion Plan 2025-2029 and Community Grants Guidelines.

Documentation eg survey results, local data, research, consultation with community.

Attach a file:

30% Describe how the initiative has been planned and is feasible: What are the goals and timelines? Are there any risks and mitigation strategies? How is the initiative sustainable beyond the funding period? Do you have any partners or collaboration in delivering the initiative? Does the initiative extend or improve activities beyond what the organisation currently provides? *

Word count:

Maximum 200 words. Projects must be delivered by 30 June 2026.

OPTIONAL - Additional documentation eg letters of support

Attach a file:

15% Please describe your organisations capacity to deliver the initiative eg staff, volunteers, resources and any previous experience delivering similar initiatives? *

Word count:

Maximum 200 words.

Optional

Attach a file:

15% Please describe the proposed outcomes, a plan for evaluating and measuring success? How many Bayside residents will participate? *

Word count:

Maximum 200 words

Optional

Attach a file:

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Budget

Please ensure the budget is clear, realistic and value-for-money based on sound cost estimates. Please include quotes below where possible.

The tables below must represent the TOTAL financial expenditure for the initiative including both from Bayside City Council and alternative funding sources such as other funding bodies, cash or in-kind support from your organisation.

List all the costs to implement the initiative in the below 3 tables.

Table 1: Bayside Council Grant - Expenses **(must match the \$ amount requested)**

Table 2: Other Income sources - Expenses

Table 3: In-Kind Support

Note: Council does not penalise your application for securing funding from other sources.

Bayside Council Grant Expenditure Description	Amount
	Must be a dollar amount.

Income

Please include: cash, other grants or funding source, tickets and/or fees.

Income Source	Other Expenditure Description	Amount (\$)
		Must be a dollar amount.

In-kind Support

Please include: volunteer labour hours, donated goods, materials or services, equipment or venue hire, advertising and/or marketing.

In-kind Expenditure Description	Amount (\$)
	Must be a dollar amount.

Budget Totals

Total Expenses (Bayside Council Grant)	Total Expenses (Other Income Source)	Total In Kind-Support	Total Program Expenditure
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.

OPTIONAL File Upload - QUOTES

Attach a file:

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Please upload any quotes you have received relating to proposed expenditure

6. Alignment with Community Grant Program Objectives

* indicates a required field

Please tick the Community Grant Program objective your project aligns with:

*

- Enhance social connection, community cohesion and mental wellbeing
- Increase healthy and active community living
- Strengthen community safety and reduce inequities
- Increase accessible and inclusive community participation for people with disability and other priority populations
- Advance reconciliation and cultural learning to strengthen relationships with First Nations communities

At least 1 choice must be selected.

Bayside City Council Health and Inclusion Plan 2025-2029 reflects the views of the community and how best to support improved wellbeing and Inclusion within Bayside.

8. Auspice Organisation Details.

For organisations requiring an auspice the following information must be completed.

Auspice Organisation name

Auspice Address

Address

Suburb State Postcode

Must be an Australian post code.

Email

Attach letter of commitment from the Auspice Organisation

Attach a file:

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NOTE: A letter from the Auspice Organisation is required indicating their commitment to manage the funds for the applicant if they are successful.

Upload the organisations Certificate of Incorporation.

Attach a file:

If the auspice has an Australian Business Number (ABN) please provide.

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Auspice Project Contact Details

Auspice Contact

Title First Name Last Name

Position held

Phone Number (BH)

Email

Must be an email address.

Auspice Organisation Financial Details

Does the auspice organisation carry Public Liability Insurance cover?

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- Yes
- No

If yes, state the amount of cover

Attach a current Certificate of Currency for auspice organisation's Public Liability Insurance

Attach a file:

Attach a copy of the auspice organisation's most recent annual financial statement

Attach a file:

9. Review and submit

* indicates a required field

Child Safety Statement and Declaration

Bayside City Council is proud to be a child safe organisation. We are committed to the rights of all children and young people to feel safe and be safe when participating in activities, services and programs in the City of Bayside. Grant recipients are required to meet the expectations of appropriate behaviour towards, and in the company of, children and young people as outlined in Council's Child Safe Code of Conduct at all times, including complying with current legislative requirements and Victorian [Child Safe Standards](#). This may include your organisation adopting a Child Safe Policy or Statement.

[Bayside Child Safety and Wellbeing](#)

[Safeguarding Children and Young People - Code of Conduct 2021](#)

For more information please contact Bayside's Child Safety Officer on 9599 4444.

Child Safe Declaration *

- The proposed initiative involves direct contact with children
- The proposed initiative involves irregular or unplanned contact with children
- The proposed initiative will not involve any contact with children

If your proposed initiative involves either direct or indirect contact with children, and you are unable to confirm that Child Safety measures will be in place, you may be ineligible for funding.

Upload evidence of the organisation's commitment to child safety.(If relevant)

Attach a file:

Evidence could include the organisation's Child Safe policy or statement of commitment to child safety

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Privacy statement

We respect your privacy. We will not sell or give away your personal information. Occasionally we may use your details for our own research purposes or to let you know about other Council information. If you want to see your personal data, modify your details, or if you receive information from us that you do not want in future, please contact the Privacy Officer on 03 9599 4444 or email privacy@bayside.vic.gov.au

Information about all grants awarded by Council will be made available to the public as required by the Local Government (General) Regulations 2015. This will not include any personal information concerning members of the recipient organisations.

Declaration

*

- I agree the information in this application and the attachments is, to the best of my knowledge, true and correct. I shall notify Bayside City Council of any changes to this information or circumstances that may affect this application. I understand that this is an application only and may not necessarily result in funding approval.
- I understand that if this application is successful, we automatically accept the conditions outlined within the Community Grants Policy and Annual Community Grants Guidelines

Collection Notice

Bayside City Council (Council) collects your information so your Annual Community Grants application can be processed. Council uses the SmartyGrants system to house and process applications, however application information is not shared with third parties. If there was a requirement to share your information Council would seek your consent prior to this taking place. Council maintains full control over who can access the system. If you choose not to provide this information Council may not be able to process your application.

If you have any questions about how your personal information will be handled or would like to gain access to your personal information, you can contact Council's Privacy Officer on (03) 9599 4444 or via email privacy@bayside.vic.gov.au.

Ensure you Click the **SUBMIT** tab once you review your application. You will receive a confirmation email to let you know that your application has been received. If you do not receive a confirmation email within the hour you have not submitted your application.

Refer to the [help guide](#) if you require further information on how to submit, or contact Bayside's Community Grants Officer on 9599 4787 or at grants@bayside.vic.gov.au.