

2026/2027 Community Initiatives Program - Round 2

Form Preview

COMMUNITY INITIATIVES PROGRAM

* indicates a required field

FAQs

Go to: [Frequently Asked Questions](#) - Council's **Community Initiatives Program** web page

- Contact [SmartyGrants](#) with any application log in issues
- Contact the **Community Projects Officer** lainie.edwards@clarence.nsw.gov.au for support or schedule a meeting.

Are you Eligible?

Check the Community Initiatives Program [Guidelines and Donations Policy](#) located under the **Community Initiatives Program** tab on the Funding and Grants page of Council's Website.

Have you already received funding from Clarence Valley Council in the 2026/27 financial year? *

- ☐ Yes
☐ No

Council will only provide funding to any organisation once per financial year. This includes waivers, donations, sponsorship, and in-kind.

If yes, provide details: project/event, amount

Previous Funding & Acquittal

Do you have an overdue acquittal? *

- ☐ Yes
☐ No

Applicants with overdue acquittals are not eligible for funding until their paperwork is up to date.

Organisation Details

* indicates a required field

Organisation name *

Organisation postal address *

Address

Suburb State Postcode

2026/2027 Community Initiatives Program - Round 2

Form Preview

--	--	--

Primary contact *

Title	First Name	Last Name

Contact's position *

Contact's phone number *

Contact email *

Must be an email address.

Secondary contact name *

Must be a second authorised contact

Secondary contact phone *

Secondary Contact Email

Organisation primary purpose *

Word count:

Explain in no more than 100 words the purpose of your organisation and it's benefit to the Clarence Valley Community

Organisation ABN (Schools exempt)

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

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Must be an ABN. Use auspice organisation ABN if applicable.

Is your organisation *

☐ Non-profit (with group bank account)

2026/2027 Community Initiatives Program - Round 2

Form Preview

- ☐ Incorporated
☐ Auspiced

Provide auspice details if you do not have an ABN or group bank account

Incorporation Number

Name of auspice organisation (if applicable)

Auspice organisation incorporation number

Does your organisation (or your auspice) have current public liability insurance?

- ☐ Yes
☐ No

Donation Categories

* indicates a required field

The Community Initiatives Program has 4 categories:

What category are you applying for? *

- ☐ Cash
☐ Rates
☐ Fee Waiver
☐ Educational Institutions (\$100 for awards night only)

You may apply for more than 1 category. Please check guidelines for eligibility.

Sporting Clubs must be:

- ☐ a member of the Good Sports Program?
☐ requesting sponsorship of an event or award

NOTE: Under the guidelines, sporting clubs and associations must be a member of the Good Sports Program to be eligible for funding and can only request sponsorship of an event or an award

Category - Cash

Amount requested *

\$

Project / Initiative title *

Max. 20 words

2026/2027 Community Initiatives Program - Round 2

Form Preview

Project / Initiative details - please include venue and relevant dates *

Word count:
Explain in no more than 100 words

QUOTE for items / services *

Attach a file:

Quotes must be equal to or more than the amount requested

Budget

Expenses - list of items / services

\$

List all expenses you expect your project to incur	
	\$
	\$
	\$
	\$
	\$

Budget Totals

Total expenses *

\$

This number/amount is calculated.

Category - Rates

NOTE: In order to be eligible for a rates waiver, you must be able to tick yes to the following questions UNLESS your organisation is responsible for providing/ maintaining toilets and facilities for public use. Generally, Council will consider donations for **general rates only**. In some cases donation of water charges will be considered, if the water use is through toilet facilities made available to the community and there are no other public toilet facilities in the vicinity.

Is the property an integral part of the service delivery and not used for any commercial activity?

- ☐ Yes
☐ No

Can you demonstrate, through financial statements, a need for assistance to pay the rates?

- ☐ Yes
☐ No

Approximate rate amount *

\$

2026/2027 Community Initiatives Program - Round 2

Form Preview

Property name for which rates donation is sought *

Property Address (Street No. and Street) *

Information can be found on Council rate notice

Property No.

Lot No.

Deposit Plan (DP) No.

Owner of land on which property is located

- ☐ Council
☐ Crown
☐ Other:

Category - Fee Waiver

Only applicable to Council owned and operated outdoor spaces, facilities and buildings.
Obtain a QUOTE via [Bookable](#) for the relevant venue OR contact Clarence Valley Council for a quote.

Council fee amount *

Council Venue / Open Spaces name *

eg. Market Square, Jim Thompson Pavilion

Project / Initiative title *

Max. 20 words

Project / Initiative details - please include venue and relevant dates *

Council Venue / Open Spaces Quote *

Attach a file:

2026/2027 Community Initiatives Program - Round 2

Form Preview

Contact Council Venue/Open Spaces officer or click on BOOKABLE at top of this section

Category - Educational Institutions

Name of your school *

Tell us how the funding will be spent *

Attach any additional documentation to support your application

Attach a file:

Project / Initiative information

* indicates a required field

Will this project / initiative involve collaboration or partnerships with any other group or organisation? *

- ☐ Yes
☐ No

If Yes, explain who you will work with and how you will work together

Word count:
50 word max

Project start date *

No earlier than 1st January 2027

Project end date *

No later than 30th June 2027

How is your project / initiative linked to the CVC Community Strategic Plan (Our Community Plan)? *

Please choose one from the drop down box that most suits your project / initiative.

Who will your project / initiative benefit? *

2026/2027 Community Initiatives Program - Round 2

Form Preview

- ☐ People with disability
- ☐ First Nation Peoples
- ☐ People from non-English speaking backgrounds
- ☐ Children and families
- ☐ Youth
- ☐ Seniors

- ☐ Women
- ☐ Men
- ☐ LGBTQ+ people
- ☐ Rural and remote residents
- ☐ Volunteers
- ☐ Other:

At least 1 choice must be selected.

How many people do you expect to participate in the project / initiative? *

If successful, how will you recognise Council's support for your project / initiative? *

- ☐ Radio
- ☐ Email
- ☐ Website
- ☐ Newspaper
- ☐ Social Media
- ☐ Flyer
- ☐ Schools
- ☐ Newsletter
- ☐ Community Centre
- ☐ Other:

Please note that, if successful, you will be asked to provide evidence of this in your acquittal

Which evaluation methods will you use to measure your project / initiative outcomes? *

- ☐ Survey
- ☐ Numbers of people attending event/ activities
- ☐ Participant feedback
- ☐ Number of resources distributed
- ☐ Number of people visiting organisation
- ☐ Visitor book entries
- ☐ Other:

At least 1 choice must be selected.

Please note that, if successful, you will be expected to draw upon this information to acquit your grant

Feedback

How did you hear about the Community Initiatives Program? *

- ☐ CVC website
- ☐ Social media
- ☐ Word of mouth
- ☐ Radio
- ☐ Email
- ☐ Newspaper
- ☐ Other:

At least 1 choice must be selected.

Supporting Documentation

NB: Applicants applying for the EDUCATIONAL INSTITUTIONS category are NOT REQUIRED TO COMPLETE THIS SECTION. All other applicants MUST provide the following:

- **Incorporated organisations must provide the most recent financial report, a valid public liability certificate, ABN and Incorporation documents (or those of your auspice).**

2026/2027 Community Initiatives Program - Round 2

Form Preview

- **Non Incorporated groups must provide a recent bank statement.**

You must UPLOAD ALL DOCUMENTS relevant to your organisation.

Financial/ Bank Statement (last financial year)

Attach a file:

If multiple pages, please scan as one document

Public Liability - Certificate of Currency

Attach a file:

ABN Evidence / Certificate

Attach a file:

Incorporation Certificate

Attach a file:

Next Steps

An application does not guarantee funding, nor does it guaranteed you will receive the entire amount requested.

At the closure of this round, all applications will be assessed by a panel on their merit against the Program Guidelines and the Donations Policy.

The panel will make recommendations on size of the donation based on the information you have supplied, the number of eligible applicants and the Program budget.

Recommendations will be reported to either the June (R1) or December (R2) Council meeting, after which you will receive a decision letter via email.

If your organisation has not previously received a donation from Council or if your account details have changed, you will need to provide a Supplier Form. Public schools will have to provide a purchase order before donations can be paid.

Certification & Privacy Advice

* indicates a required field

Certification and Undertaking

2026/2027 Community Initiatives Program - Round 2

Form Preview

- I certify that all details supplied in this application form and in attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the applicant group / organisation.
- I have read and followed the Donations Policy and Community Initiatives Program Guidelines.
- An undertaking is given that any and all funds granted by Council will only be expended on the project for which the funds were sought as applied for in this application.
- Electronic submission of this application will be taken as providing your statement of truth and acceptance of terms as outlined. It acknowledges that you have the authority to complete and submit this application on behalf of the applicant organisation.

Contact name *

Title

First Name

Last Name

Contact position *

Date *

Must be a date

Supporting Documents checklist

Have you attached the following documentation? (Cash, Fee Waiver & Rates Categories Only) *

☐ ABN Registration Certificate

☐ Incorporation Certificate

☐ Financial / Bank Statement (most recent)

☐ OR Exempt - Educational Institution

☐ Public Liability Certificate of Currency

☐ Other:

Tick the documents you have attached, failure to supply required documentation could render your application ineligible

Privacy Advice

The personal information Council has collected or is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 (PPIPA). Council will only use this information in accordance with the PPIPA.

The supply of this information by you is voluntary. However, if you cannot provide or do not wish to provide the information sought, the Council may be limited in dealing with your application/request. Council requires this personal information from you in order to process your application.

You may make application for access or amendment to your personal information held by Council. Council will consider any such application in accordance with the PPIPA. Council is to be regarded as the agency that holds the information.