**2025 COMMUNITY QUICK RESPONSE GRANTS APPLICATION FORM**

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| Name of Business or Organisation |  | |
| Project Name |  | |
| Briefly describe your project in one sentence. |  | |
| Contact Person |  | |
| Position held in the organisation |  | |
| Postal Address |  | |
| Phone |  | |
| Email |  | |
| Where will your project take place? |  | |
| Is your business appropriately insured to undertake this project? | Yes  | No  |
| Applicant Type:   An Incorporated, non-profit community-based organisation   An unincorporated group or individual (see below)   A local business | | |
| If you are an unincorporated group or individual and the grant is to be managed by a sponsor (auspice) body, please give details below | | |
| Name and Address of the Sponsor (Auspice) Body. |  | |
| Does your organisation (or the sponsor if using) have an ABN? | Yes  | No  |
| ABN Number (if applicable). |  | |

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| Is your organisation (or sponsor) registered for GST? | Yes  | No  |
| What community need, issue or idea is the project responding to? (50 words max) |  | |
| What do you want to see happen? (50 words max) |  | |
| What will you do to achieve this? (200 words max) |  | |
| How will you measure your success? (50 words max) |  | |
| When will you start and finish? (50 words max) |  | |
| How will the project connect people with others? (50 words max) |  | |
| How does the project celebrate one or more core values in the [Community Vision](https://www.huonvalley.tas.gov.au/community-vision/)  (100 words max) |  | |
| What benefits will be ongoing to the community? (100 words max) |  | |
| Who else will you work with? (25 words max) |  | |
| What will you spend the Council’s grant money on? (25 words max) |  | |
| Support Material may include up to five images, quotes or documents relating to project expenditure (no page limit) and/or letters of support. | | |