

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Instructions to Applicants

Campbelltown ClubGrants

Getting Support

Contact us on 4648 5933 during business hours or email networking@sectorconnect.org.au. and quote your application number.

Navigating (moving through) the application form

On the right hand side of every screen, there is a box which links directly to every page of the application. Click on any page to jump directly to that page. You can also click 'next page' or 'previous page' on the top or bottom of each page to move forward or backward through the application.

Saving your draft application and returning later

You can press 'save' at any point and log out. When you log back in and click on the 'My Applications' link at top of screen, you will find a listing of any applications you have started or submitted. Your draft application will be saved and you can start where you left off. Once you have created your application you can download it as a PDF by clicking on the download button at the bottom of the application navigation panel.

Submitting your application

You will find a Review button at the bottom of the Navigation Panel. You need to review your application before you can submit it. Once you have reviewed your application you can submit it by clicking on 'Submit' at top of screen or on the navigation panel. You will not be able to submit your application until all the compulsory questions are completed.

Once you have submitted your application no further editing or uploading of support materials is possible.

When you submit your application you will receive an automated successful confirmation email with a copy of your submitted application attached. This will be sent to the email you used to register. ***If you do not receive a confirmation of submission email then your submission has NOT been received.***

Attachments and support documents

You may need to upload/submit attachments to support your application. This is very simple, but requires you to have the documents saved on your computer, on a zip drive, or similar. Please remember to allow enough time for each file to upload before trying to attach another file. Files can be up to 25MB each, however we do recommend trying to keep files to a maximum of 5MB. If it is above 5MB be aware this may take longer to upload.

If you are not able to upload a document, please contact us for support (see above).

Completing an application in a group/team

A number of people can work on an application using the same log in details as long as only one person is working at a time. Ensure you save as you go.

All questions marked with * are compulsory. You are unable to submit your application unless all compulsory questions have been answered.

Campbelltown Priorities for 2015

CATEGORY	TARGET GROUPS	IDENTIFIED PRIORITY AREAS
----------	---------------	---------------------------

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Community Welfare & Social Services	Child Care	<ul style="list-style-type: none"> • Flexible child care arrangements • After school activities for primary aged children
Community Welfare & Social Services	Seniors	<ul style="list-style-type: none"> • Isolation and services for older people
Community Welfare & Social Services	Disability	<ul style="list-style-type: none"> • Education for children with a disability • Transition to and from school for children with a disability • Understand the needs of people with a disability
Community Welfare & Social Services	Accommodation	<ul style="list-style-type: none"> • Crisis accommodation • Crisis accommodation for young people in crisis • Accommodation and other services for people with a disability • Housing & Homelessness Projects & respite accommodation
Community Welfare & Social	Families & children	<ul style="list-style-type: none"> • Domestic Violence services

Community Development	Community Service Organisations	<ul style="list-style-type: none"> • Support existing & newly established community services • Mentoring and skilling community for management committees
Community Development	Accessibility	<ul style="list-style-type: none"> • Access to public transport / transport projects
Community Development	Community Tolerance	<ul style="list-style-type: none"> • Community support of social issues affecting different cultures • Regional cultural planning • Community awareness of sexuality issues
Community Development	Youth	<ul style="list-style-type: none"> • Entertainment, recreation & leisure for young people & families • Changing the perception of young people and crime • Community education on social issues and perceptions affecting young people especially those from different cultural backgrounds

CATEGORY	TARGET GROUPS	IDENTIFIED PRIORITY AREAS
		<ul style="list-style-type: none"> • People suffering from a range of medical, dental and mental health issues

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Community Health Services	Community	<ul style="list-style-type: none">• Children's health, nutrition and obesity• Young people & health (e.g. smoking / drug & alcohol)
Community Health Services	Support	<ul style="list-style-type: none">• Services for carers including young carers• Education and advocacy for health services

Employment Assistance Activities	Youth	<ul style="list-style-type: none">• Employment opportunities for young people• Retaining skilled young people in Macarthur<ul style="list-style-type: none">• Early school drop out of school
Employment Assistance Activities	Partnerships & Networking	<ul style="list-style-type: none">• Improved networks & structures between the education system and the community• Opportunities for local employment• Attracting business to Macarthur

PRIORITY WILL BE GIVEN TO:-

- Smaller groups with limited access to alternative sources of funding.
- Local services who focus on the local area.
- Funding applications \$5000 or under.
- Funding one application per organisation – please prioritise your project carefully.
- Project that provides wider benefit to the local community.

Applicant Details

Organisation

Exact Name of Organisation* Autism Community Network
Exact name of the incorporated organisation.

ABN 64 103 662 535

Information from the Australian Business Register	
ABN	64 103 662 535
Organisation Name	Autism Community Network

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Status	Active
Type of Organisation	Other Incorporated Entity
Registered for GST	Yes
DGR Endorsed	Yes
ATO Charity Type	Charitable Institution More information
Tax Concessions	FBT Rebate, GST Concession, Income Tax Exemption
Registered Address	2210 NSW
<i>Information current as at 12:00am yesterday</i>	

Postal Address* PO Box 188
Petersham NSW 2210

General Email Address* info@autismcommunity.org.au

Status

Is your organisation a non-profit organisation?* Yes

Is your organisation incorporated?* Yes

If yes, please indicate which form of incorporation Incorporated Association

Contact Person(s)

Contact Person 1

Organisation / Program Manager or main voluntary organiser

Contact Person 1 Name* Mrs Claudia Walters

Contact Person 1 Position/Title* Strategic Manager

Contact Person 1 Email* claudia@autismcommunity.org.au

Contact Person 1 Tel* 0420 669 281

Contact Person 1 Fax

Contact Person 2 (optional)

President / Chairperson, Secretary or Treasurer of Management Committee / Board

Contact Person 2 Name Mr Warren Thompson

Contact Person 2 Position/Title President

Contact Person 2 Email warren@autismcommunity.org.au

Contact Person 2 Tel 0410 850 508

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Contact Person 2 Fax

Project Overview

Project Name* Campbelltown Community Leaders in Autism

Please provide a short outline of your project* "Campbelltown Community Leaders in Autism" will see people with Autism Spectrum Disorders and their family members develop and deliver tailored projects that improve the health and social wellbeing of people affected by this debilitating condition. Autism is a lifelong developmental disability with deficits in communication, socialisation and behaviour. We already support 142 members with autism in the Western Sydney area, only 18 of which live in Campbelltown LGA . According to ABS data, the LGA is home to over 1,313 people with autism. This program will outreach to those families and provide services developed by the community, for the community.

Word Limit: 100

Project Sponsors (if applicable)

What is the primary Local Government Area in which your project is taking place?

Local Government Area A-B

Local Government Area C Campbelltown

Local Government Area D-K

Local Government Area L-M

Local Government Area N-P

Local Government Area Q-V

Local Government Area W-Y

Community Priority Needs

Which of the following community priority needs listed below does your project address?

Community Welfare and Social Services: A1 - family support/emergency or low cost accommodation
A4 - aged, disability or youth services

Community Development

Community Health Services

Employment Assistance
Activities

Target Group

Who will your project benefit?* Families
People with disabilities

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

How many local residents will your project benefit?

Recipients* 100

Volunteers* 5

If you expect indirect beneficiaries, who might they be? Residents of Pittwater will benefit through greater participation by people with Autism and their families in community life as social isolation is reduced.

What impact do you hope to have on your identified local community priority needs? * 5 project champions will volunteer to coordinate the projects developed through "Campbelltown Community Leaders in Autism" We hope that at least one of these will be a young person with Autism or a young carer. Improve health, economic and social outcomes for people with Autism and their families through the delivery of 5 tailored events/projects.
Word Limit: 300. Note: You will need to evaluate and report on your project against these outcomes.

How will you know that you have made a difference (and measure your outcomes)?* 5 volunteers will be recruited, trained and supported to coordinate a project each. These people will be asked to give feedback on benefits they gained through participation. 5 events/projects staged. Attendances recorded. Participant feedback on health, economic and social outcomes derived from each project.

Project Schedule and Sustainability

What is the proposed commencement date and completion date for the project?

You may use this section to begin to plan the activities for your project into a timeline – in which case please add an additional page.

Start* 01/07/2015

Finish* 30/06/2016

Does the project need to be followed up after completion? How? No the project is stand alone however it will give us information about the needs of people with autism in the Campbelltown LGA and Western Sydney region and the services/facilities available. This information will inform future projects in the area. We are a small, peer to peer organisation which earned \$93,000 YTD through grants and fundraising to support over 680 families across Sydney. We have a very high rate of volunteering but need resources to start providing support in Campbelltown.

What are your plans to ensure that the benefits of the project will be sustained? The projects will introduce many new families to the Autism Community Network which will enable them to link in to our on-line service directory, forums and newsletters. Volunteers trained and supported through this project will be offered additional opportunities to participate in other activities of the Autism Community Network. Ideas for events/projects piloted through this process may become the focus of future programs for the Autism Community Network.
That is, continue after the project has finished and there is no more funding available? Word limit 300 words. Mandatory for Social Enterprise applicants

Partnerships

Are you working with other partners in this project, or have you asked for support from anyone else?* No

If yes, please provide contact

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

details

Is anyone else doing a similar project in this LGA with your target group?* Yes

If yes, who? Have you spoken to them about collaboration / ensuring non-duplication of services? Macarthur Disability Services run a Support Group for Parents and Carers of people with ASD. They currently support about 200 individuals but this is only about 15% of the Autism population in Campbelltown. Community Links in Wollondilly are piloting a support group for people with Autism with 6 sessions planned.

Is this program, project or service already assisted by an existing Government funding program?* Yes

If yes, please give details and tell us who you have spoken to about collaboration or ensuring non-duplication of services Carers NSW Together Program provide funding to support carer groups to cover catering, equipment and administrative costs. We currently access this funding through Amanda Prince in other areas around Sydney and will register for Campbelltown in 2015/16.

Funding Sources

What is the total amount of funding you are seeking for this application?* \$4,943.51
Please note, while there is no limitation on project size, "value for money" considerations and the fact that most clubs cannot fund large projects, mean that additional justification is recommended for large projects.

Can your project be broken into smaller sections for part funding?* Yes

If so, how? By supporting fewer projects.

Have you applied, or do you intend to apply directly, to any other registered club or funding body for this project?* No

If yes, please identify We have applied for funding for projects such as this for Hurstville, Sutherland, Sydney city, Hills, Parramatta and Pittwater. We also intend on seeking funding for Randwick and Marrickville. These other projects, while similar in nature, do not support the same residents as they target people with autism and their families in other LGAs. See signed declaration at the end of the application form.

Will ALL the ClubGRANTS funding you have requested be spent within the Local Government Area you have applied for No

If No, approximately what proportion will be spent outside the local area? 10%

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Budget

Has your organisation received funding from the ClubGRANTS (formerly CDSE) program before?*

Yes

If yes, please provide details for the past 2 years (when, what for, and how much), and indicate when you sent in your most recent Standard Funding Report Form?

2013/14 - Hurstville \$4,808 for drama club; Kogarah \$3,000 for drama club; City of Sydney \$2,000 for music club; Marrickville \$4,600 for music club; Sutherland \$4,830 for support group
2014/15 - Bankstown \$4,866 for art club ; Randwick \$3,744 for support group
25 March 2015 - Final Acquittal for Sutherland

Please complete the following project budget for your proposal, including funding from this and any other funding sources.

Include an explanation of the basis for each item, for example:

Facilitator Fees @ \$40ph x 2hpw x10 weeks
Printing \$300
Rental Contribution 1/5th of total space occupied

Budget*

Income Description	\$	Expenditure Description	\$
Campbeltown ClubGRANT	\$4,943.51	Project Coordinator 11 months x 10hrs/month x \$36.12/hr	\$3,973.20
Carers NSW Together program	\$1,500.00	Supervision and promotion 10hrs x \$47.31/hr	\$470.31
ACN volunteers	\$1,000.00	Administration	\$400.00
Venue in-kind from	\$550.00	Catering for pamper day \$20/hd x 25 participants	\$500.00
	\$	Travel	\$100.00
	\$	Contractors for pamper day 2 x \$250	\$500.00
	\$	Volunteers 5 x 10hrs x \$20/hr	\$1,000.00
	\$	Venue 11 x 2hrs x \$25	\$550.00
	\$	Project costs 5 x \$100	\$500.00
	\$7,993.51		\$7,993.51

Please attach two quotes for each capital item costing \$1,000 or more.

Attach quotes here: *No files have been uploaded*

Banking Details

The Club may wish to provide applicants with a cheque, please advise as to who the cheque should be made out to for this purpose?*

Autism Community Network

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Please provide either:

- a) Your organisation's bank details, or
- b) Your auspice's bank details, if your application is being auspiced.

Account Name	Autism Community Network
BSB	062234
Account Number	10417253

Documentation

Please attach your latest annual report

- [ACN Annual Report 2014 \(small\).pdf](#) 767.8 kB

Please include an audited financial statement

- [Autism Community Network Inc 2014 Audit Report.pdf](#) 177.6 kB

Please attach letters of support here

No files have been uploaded

Declaration

Funding Conditions

If your application for funding is successful you will be required to:

1. Ensure that your organisation does not accept funding for the same project from any other source unless joint funding is required for the implementation of the project AND you have informed all funders of all sources of funding for this project.
2. Make an appropriate level of acknowledgement of the funding source for the project.
3. Provide a Standard Funding Return Form (including Statutory Declaration) detailing the application of the funds (or providing a progress report, whichever is relevant at that time) – for projects up to \$5,000.
4. Complete a Clubs Grant Project Return Form at the end of the project (for projects over \$5,000). Provide an audited financial statement for such projects over \$20,000 (one copy only or electronic copy emailed or linked). Providing a progress report using the same form by the end of January after funding is received.
5. Where an individual grant for ClubGrants funding exceeds \$10,000, the recipient organisation must enter into a formal contract with the sponsoring Club.
6. Facilitate communication regarding the progress of your project with the Funding Club(s) and the scheme's coordinator, including any on-site visits that may be requested in order to further understanding of the project and relationships in the program
7. Abide by any other conditions which may be placed on the funding of the project (such as collaboration with other relevant local projects or activities)
8. The granting organisation accept no liability for any errors that may arise in implementing the ClubGrants Scheme. Although care is taken to ensure that the information is correct at any given stage of the ClubGrants process, granting organisation cannot guarantee and assumes no legal liability or responsibility for the accuracy, currency or completeness of the information.

Declaration, Authority and Consent

The Applicant declares that the Application Information is true and correct. The Applicant will notify the Club of any changes to this information and any circumstances that may affect this application.

The Applicant authorises and consents to the Club:

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

1. referring this application (as necessary) to external experts for assessment, reporting, advice, comment or for discussions regarding alternative or collaborative grant funding opportunities.
2. disclosing the Application Information to ClubsNSW and to ClubsNSW collecting, aggregating, having access to, using, disclosing and publishing the Application Information for the ClubsNSW Purpose.

"**Application Information**" means all information and data (including email and personal information) provided, generated, transmitted or displayed on or via the SmartyGrants Online Grants Management System by the Applicant.

"**ClubsNSW Purpose**" means:

- (a) to quantify the social contribution made by Clubs by the making of grants; and
- (b) to use, disclose and publish the Application Information which it collects and aggregates from Clubs to act as an advocate on behalf of the Club industry.

I understand that this is an application only and may not necessarily result in funding approval.

I am authorised by the Applicant to submitting this application and agreeing to the Declaration, Authority and Consent.

I have read and agree to the above:* Yes, I have read and agree

Authorised Person* Mrs Claudia Walters

Position* Strategic Manager

Date* 30/04/2015

Application Checklist

Are all questions on application form completed? yes

Is your organisation not for profit? yes

Is your organisation incorporated? yes

If no, is your project auspiced by an incorporated organisation?

Is the project locally based? yes

Is your application \$5000 or under? yes

Does the project address the funding priorities identified by the local yes

Does your project duplicate existing services in the same area? no

Campbelltown Cat 1 2015

Category 1

Application 00228 from Claudia Stevens

Is your project a core local, state or federal government responsibility? no

Have you provided a funding report / progress form on all ClubGRANTS (previously CDSE)funding previously received? yes

Have you attached a copy of your last annual report including financial yes