

Employee Connected Grants 2018

Employee Connected Grant Application Form 2018

Application EC201800244 From Steve Drakoulis - DRAFT

ELIGIBILITY CHECK

* indicates a required field

In order to be eligible to apply for an Employee Connected Grant, you will need to meet **EACH** of the eligibility criteria set out in the [Eligibility Criteria](#).

Unfortunately, if you do not meet each of the requirements please do not continue as we will not be able to consider your application for this grant round.

Do you meet each of the eligibility criteria? * Yes
 No

How did you find out about the Employee Connected grants? * informed by a colleague

ALL QUESTIONS ARE MANDATORY SO PLEASE CAREFULLY CONSIDER AND RESPOND TO EACH QUESTION

THE APPLICANT ORGANISATION

* indicates a required field

APPLICANT ORGANISATION DETAILS

Applicant Organisation * Autism Community Network
This must be the part of the Organisation that has DGR1 status. Please check the ABN Lookup to insert correct entity. Organisations that do not have DGR1 status according to the ABN Lookup are advised not to apply as their application will be ineligible.

Applicant ABN * 64 103 662 535

| Information from the Australian Business Register | |
|---|--|
| ABN | 64 103 662 535 |
| Entity name | Autism Community Network |
| ABN status | Active |
| Entity type | Other Incorporated Entity |
| Goods & Services Tax (GST) | Yes |
| DGR Endorsed | Yes (Item 1) |
| ATO Charity Type | Charity More information |
| ACNC Registration | Registered |
| Tax Concessions | FBT Rebate, GST Concession, Income Tax Exemption |
| Main business location | 2234 NSW |

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Information current as at 12:00am yesterday

Applicant Primary Address * Illawong Community Centre
273 Fowler rd
Illawong NSW 2234

Applicant Postal Address * PO Box 188
Riverwood NSW 2210

Applicant Website * <http://www.autismcommunity.org.au>

CEO (or equivalent) DETAILS

Name of CEO * Steve Drakoulis

CEO Phone Number * 0431 724 229

CEO Email * steve@autismcommunity.org.au

APPLICANT ORGANISATION CONTACT PERSON

Applicant Contact Name * Steve Drakoulis

Applicant Contact Position * General Manager

Applicant Contact Phone Number * (02) 9543 9036

Applicant Contact Email * steve@autismcommunity.org.au

Applicant Contact Mobile * 0431 724 229

PAYMENT

Should your application be successful cheques will be

- made payable to the Applicant Organisation (or the part of the Organisation with DGR1 status);
- sent to the Applicant Contact Name, and
- posted to the Applicant Postal Address

as inserted above

THE PROJECT

* indicates a required field

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PROJECT DETAILS

| | |
|---|---|
| Project Title * | Autism Youth Inclusion Program |
| Start Date * | 01/07/2018 The Project must start within 12 months of grant award |
| End Date * | 30/06/2019 |
| Total Amount Requested * | \$25,000.00 What is the total financial support you are requesting in this application? Please note this cannot be more than \$25,000. |
| Total Project Cost * | \$33,450.00 What is the total budgeted cost (dollars) of your project? |
| What does your organisation do? (A brief overview focusing on the activities and programs you deliver) * | <p>The Autism Community Network (ACN) is a charity focused around building a strong community of support for autism. We use our combined knowledge and experiences as carers or individuals in the 'autism community' to help each other. We have more than 1,200 families registered in the network, many of whom come together all across Sydney via our support groups, family days and kids clubs. We work to create a society where people with autism and their families lead rich, full and rewarding lives.</p> <p>Must be no more than 100 words.</p> |
| Short project description (A short summary of your project) * | <p>Like their peers, autistic teens need to feel like they belong; to be able to attend activities with others where they'll feel included and won't be judged. Too many feel isolated and lonely. Our aim is to provide appropriate Youth Clubs for them where they form social circles, learn to make friends, and feel positive about themselves and their future. Kids who feel happy about themselves will grow into positive and healthy adults.</p> <p>Must be no more than 100 words.</p> <p><i>In your response to the above question please include how the project will inspire moments of happiness and possibilities for young Australians aged 13 to 19 years.</i></p> <p><i>Outline how your project builds capability for these young Australians by addressing</i></p> <ul style="list-style-type: none">• <i>Optimism</i>• <i>Empowerment</i>• <i>Increased possibilities for a positive life, and/or</i>• <i>Wellbeing (emotional, physical and social)</i> <p><i>If appropriate please upload video or pictures forming part of your application here</i></p> |

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Filename: 20140314_165148.jpg
File size: 1.6 MB

Filename: 20141017_165026.jpg
File size: 1.7 MB

Filename: COMMUNITY FEEDBACK SHEET.docx
File size: 100.5 kB

Filename: IMG_1472.JPG
File size: 1.3 MB

Recommended size 5mb. Maximum of 25mb. Limit of 5 files

PROJECT APPLICATION

Why does this work need to be done? *

Most support for children with autism is aimed at younger kids. As they grow into their teens however, there are few options for them to participate in social activities and they often feel isolated. A positive self-identity and a sense of belonging are vital for our mental health. Providing opportunities for teenagers to come together in an inclusive environment where they can feel positive opens them up to so much growth and potential.

Must be no more than 100 words.

What is the specific issue or need you want to address? Please provide evidence to back this up with research.

What are the specific activities you propose to do to address the issue you have identified and where will they take place? *

We will provide Youth clubs in the north (Gordon), west (likely Parramatta), and south (Illawong) of Sydney, as well as in the Hawkesbury. In addition, we will provide a specialised 10 week martial arts program called Bully Proof Kids, focusing on getting them active, build confidence, improve coordination and learn about staying safe. In addition, during school holidays, when the programs are rested, we will arrange special events each term to provide social activities such as laser tag, bowling, movie day or other. We have run both the Youth clubs and Bully Proof successfully for at least four years elsewhere.

Must be no more than 100 words.

What are the expected outcomes of the project? What are the project goals? What do you want to achieve with the project? *

The programs will help us to show these kids that they can fit in and be just like their peers, even though they may struggle to connect at 'typical' gatherings elsewhere. We expect to see Improved mental health, improved physical health, social networks and friendships develop, increased self-confidence, and allow them equal opportunities to participate in the community.

These are the goals we have aimed for to date at our existing Youth clubs and the Bully Proof program. Their popularity reassures us we are on the right track.

Must be no more than 100 words.

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How will you know if these goals have been achieved? *

Primarily attendance will be the key indicator. We will be constantly seeking feedback from the teens on the type of activities they would like to include, as well as listening to their parents. Nothing tells us we are on the right track more than a kid asking their parents "if the club is on again this week". Attendances are recorded, photos taken regularly and testimonials sought also. Further, if we see these kids willing to attend other events in the area where once they would fear engaging, we know we are getting results.

Must be no more than 100 words.

What are the measures of success for the project, in numbers and words?

How many people will benefit from the project? *

75

Must be a number

Are all beneficiaries aged between 13-19?

Yes

No

If any beneficiaries are outside this age range your application will be ineligible.

What gender are the beneficiaries? *

both

Male, female or both

In which state(s) do the beneficiaries reside? *

- Australian Capital Territory
- New South Wales
- Northern Territory
- Queensland
- South Australia
- Tasmania
- Victoria
- Western Australia

Can more of our staff get involved in the program and, if so, how? *

We are always seeking more volunteers, especially people who have an understanding of life on the autism spectrum. We expect that you have quite a number of staff who have family affected by autism. equally, all others who have working with children clearance would be very welcome to assist at our special events for the teens and their families.

Must be no more than 100 words.

Include description of opportunities and dates.

If your application is successful we will ask you to complete an [Acquittal Report](#).

COMMUNICATIONS

The Coca-Cola Australia Foundation (CCAF) would like to tell the story of our partnership. If you are agreeable,

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we would work with your organisation to develop communications activities which are aligned with the spirit of the philanthropic grant and are appropriate for the project and your organisation.

Please acknowledge that you have read and understood this section.
*

Yes, I have read and understood this section

EMPLOYEE CONNECTION

* indicates a required field

It is a requirement for this application that an employee of Coca-Cola Amatil Australia or Coca-Cola South Pacific Pty Ltd have a personal connection to the program. Please download the [Employee Connection Form](#), have the employee complete and return to you, and upload to this application form

Name of the Employee *

Mick Garvey

Name of Employer *

Coca-Cola Amatil
 Coca-Cola South Pacific

Job title of Employee *

NSW Business Manager - Neverfail

Location of Employee *

9 Rousell Rd, Eastern Creek NSW 2766
Where is the employee based

Manager of Employee *

Joel Wishart

Completed Employee Connection Form *

Filename: Mick Garvey - 2018 Employee Personal Connection Form.pdf
File size: 71.2 kB

RECENT PAST PARTNER

Did your organisation receive an Employee Connected grant from the CCAF in 2016 or 2017? *

Yes
 No

If yes, and you have submitted the CCAF Acquittal form please upload the form.
No files have been uploaded

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If yes but you have not yet submitted an acquittal form please download [The Interim Acquittal Form](#) , complete as much as possible and upload.

Partially completed acquittal form

No files have been uploaded

BUDGET DETAILS

* indicates a required field

PROJECT BUDGET

Notes for income breakdown

Please include in the income breakdown below any in-kind contributions you are seeking including

- **Product donations and/or**
- **Volunteer hours**

Include an estimated value for non-cash contributions contributions such as services, equipment, time and materials. Please indicate in-kind contributions with 'IK'.

Include details of any other funding that has been confirmed and/or applied for.

Notes for expenditure breakdown

Breakdown individual line items including

- salaries
- equipment
- travel/transport
- administration etc

Costs associated with measuring the success of the program and operational expenses will be considered for this application.

If you are seeking operational costs, please indicate what percentage those costs are of the total project costs. * 27.6%

Budget

The budget must balance (total income = total expenditure)

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Budget

| Income | \$ | Expenditure | \$ |
|---------------|-------------|-------------------------------|------------|
| Grant | \$25,000.00 | Venues | \$3,600.00 |
| IK Aids | \$4,500.00 | Facilitators fees | \$6,800.00 |
| IK Venues | \$4,000.00 | IK Aids | \$4,500.00 |
| | | Equipment | \$2,000.00 |
| | | Resourcues | \$2,000.00 |
| | | Administration | \$4,500.00 |
| | | Special events | \$1,600.00 |
| | | promotion | \$2,400.00 |
| | | IK Venues | \$4,000.00 |
| | | Bully Proof registratio ns | \$2,100.00 |
| | | | |

Budget Totals

| | | |
|-----------------------------------|-----------------------------------|-----------------------------------|
| Total Income Amount | Total Expenditure Amount | Income - Expenditure |
| \$33,500.00 | \$33,500.00 | \$0.00 |
| This number/amount is calculated. | This number/amount is calculated. | This number/amount is calculated. |

Financial reports

Please attach the following documents

- **Latest Annual Report**
- **audited Financial Statements for the past 3 years**

Requested financial reports *

Filename: ACN ANNUAL REPORT 2017.pdf
File size: 3.0 MB

Filename: ACN Financial Statements FY17.pdf
File size: 655.8 kB

Filename: Auditor's Reports 2016.pdf
File size: 1.7 MB

Filename: AUDITORS REPORT 2015.pdf
File size: 501.6 kB

A maximum of 5 files may be attached.
Recommended size 5mb. Maximum of 25mb.

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PROCEDURAL ITEMS

* indicates a required field

Are you an Authorised Representative of the Applicant Organisation authorised to make this application on its' behalf? *

- Yes
- No

Do you certify that to the best of your knowledge the statements made in this application are true? *

- Yes
- No

Do you consent to the information contained in this application being used by CCAF (including its affiliates) or disclosed by CCAF to any third party for purposes associated with this grant application? *

- Yes
- No

Do you understand and accept that all decisions regarding the acceptance and assessment of applications and award of grants are at the complete discretion of the CCAF? *

- Yes
- No

Is the Applicant Organisation a government owned or controlled entity?

- Yes
- No

This does not impact your eligibility

Coca-Cola South Pacific is committed to being transparent on all physical activities it supports including through the CCAF. Whether or not your project includes such activities will not affect the review of your application on its merits and the following questions are asked solely for reporting purposes.

Is your program primarily a physical activity program? *

- Yes
- No

Is your program primarily about increasing outcomes via physical activity? *

- Yes
- No

If you answered yes to either or both of the above questions and your application is successful, the Applicant Organisation's name and project title and a short description may be listed on Coca-Cola channels including the [Coca-Cola Journey Australia website](#).

