

# 2015 PCC Community Capacity Building Grants - Annual

## 2015 Parramatta Community Capacity Building Grants application form

### Application CCB15-024 from Claudia Stevens

#### Instructions to Applicants

##### 2015 PCC Community Grants annual round

This form is for applicants to the annual round of the 2015 PCC Community Grants in the following categories:

- Community Capacity Building - 100% Voluntary Organisations
- Community Capacity Building - Organisations with Paid Staff
- Community Capacity Building - Second Phase Projects

If you wish to make an application for another category in the annual round or the quarterly **Small Grants Fund**, you need to complete a different application form. Please return to [www.parracity.nsw.gov.au/grants](http://www.parracity.nsw.gov.au/grants) for information.

General eligibility criteria and information and requirements specific to each of the above categories may be found in the [2015 Parramatta City Council Community Grants All Categories Guidelines](#). All applicants are strongly encouraged to read these guidelines before proceeding.

Applications close at 4:00pm on Friday 5 December 2014. Funded projects will be completed between 1 July 2015 and 30 June 2016.

#### Getting Support

Contact us on 9806 5138 during business hours or email [grants@parracity.nsw.gov.au](mailto:grants@parracity.nsw.gov.au) and quote your application number.

#### Funding Category

##### Which funding category are you applying for?

The response you make to this question, will disable the parts of this form that you do not need to fill out. You will still be able to see all the questions, but it should be obvious which ones are no longer required.

**Funding category** Community Capacity Building - Organisations with Paid Staff

#### Applicant Details

##### 2015 Parramatta City Council Community Grants annual round

Please [read the Funding Guidelines](#) thoroughly before completing this form.

##### Incorporated Organisation's details - The applicant

**Applicant organisation's name** Autism Community Network

**Applicant ABN**  
64 103 662 535

| Information from the Australian Business Register |                           |
|---|---------------------------|
| <b>ABN</b>  | 64 103 662 535            |
| <b>Organisation Name</b>                          | Autism Community Network  |
| <b>Status</b>                                     | Active                    |
| <b>Type of Organisation</b>                       | Other Incorporated Entity |

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|                           |   |
|---------------------------|---|
| <b>Registered for GST</b> | Yes   |
| <b>DGR Endorsed</b>       | Yes   |
| <b>ATO Charity Type</b>   | Charitable Institution <a href="#">More information</a> |
| <b>Tax Concessions</b>    | FBT Rebate, GST Concession, Income Tax Exemption        |
| <b>Registered Address</b> | 2210 NSW  |

*Information current as at 12:00am on 1 Dec*

The applicant must be incorporated and have an ABN. If you do not have an ABN, you may need to have an incorporated organisation act as your Auspice.

**Postal address for applicant organisation** PO Box 188  
Riverwood NSW 2210

**Street Address (if applicable)** 5/154 Broad Arrow Rd  
Riverwood NSW 2210

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

**Does your organisation use:** Facebook

### Status

**Is your organisation a non-profit organisation or a social enterprise?**

Yes

**Is your organisation incorporated?**

Yes

**If yes, please indicate which form of incorporation.**

Not-for-profit Incorporated Association

**If Co-operative or Incorporated Association, please supply your incorporation number.**

9896017

This is often a number beginning with a Y that is found on your Certificate of Incorporation.

**If Registered Australian Body, please supply your Australian Registered Body Number.**

### Organisation CEO or equivalent

**CEO / Chairperson / or other authorised office bearer of organisation** Mr Warren Thompson

**Position** President

**Phone number** 0410 850 508

**E-mail address** [warren@autismcommunity.org.au](mailto:warren@autismcommunity.org.au)

### Auspiced group's details

If this project is an auspiced project, the organisation or group being auspiced should fill out this section.

With an auspiced project, Council's primary funding relationship is with the incorporated organisation providing auspice (The Auspice Body).

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We recommend an Auspice Agreement be established between the two organisations. Council can provide advice on what should be included in this agreement.  
Call 9806 5110 for more information.

Council allows an Auspice Fee to be in the project budget, at a maximum of 15% of the total grant.

**Auspiced group's name**

**Postal address**

**E-mail address**

**Which organisation is the Project Contact Person from?** Applicant Organisation

### Information about your organisation

Please tell us a bit about your organisation.

**What area(s) is your organisation involved in?**

Children & Families  
Disability

**What services does your organisation or group provide?**

Leisure Activities  
Social Support / Groups  
Volunteering

### Project Details

#### Details on the particular project being applied for

**Project Name** Parramatta Autism Community Connect

**Amount applied for** \$4,800.00  
Must be a dollar amount

- Community Capacity Building - 100% Voluntary Organisations **(Up to \$5,000)**
- Community Capacity Building - Organisations with Paid Staff **(Up to \$10,000)**
- Community Capacity Building - Second Phase Projects **(As above)**

**Project start date** 01/07/2015  
Must be a date

**Project end date** 30/06/2016  
Must be a date

**Brief project description** Parramatta Autism Community Connect will reduce social isolation and build capacity in families supporting children with Autism Spectrum Disorders in Parramatta LGA through monthly support groups, social gatherings in a range of local facilities and improve access to on-line facilities.  
Must be no more than 40 words

### Contact Person

**Project contact person from Applicant Organisation**

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|                               |  |
|-------------------------------|--|
| <b>Project contact person</b> | Mrs Claudia Walters  |
| <b>Position</b>               | Strategic Manager  |
| <b>Phone number</b>           | 0420 669 281<br>Business hours preferred                   |
| <b>E-mail address</b>         | claudia@autismcommunity.org.au<br>Must be an email address |

### Project Contact (from Auspiced Group) *(Not Applicable)*

This page has been disabled because of your response to question: "Which organisation is the Project Contact Person from?" on page 3

### Project contact person from Auspiced Organisation *(Not Applicable)*

This section has been disabled because of your response to question: "Which organisation is the Project Contact Person from?" on page 3

#### Project contact person

##### Position

##### Phone Number

Business hours preferred

##### Email

Must be an email address

### General Eligibility

#### Bank account details

The applicant organisation must have a bank account with a minimum of two signatories.

|                          |  |
|--------------------------|--|
| <b>Account name</b>      | Autism Community Network Inc                               |
| <b>Account BSB</b>       | 062234   |
| <b>Account number</b>    | 10417253   |
| <b>Remittance e-mail</b> | funding@autismcommunity.org.au<br>Must be an email address |

#### GST Registration

If you are successful in your application, you will be required to sign a funding agreement to provide the funded service/project. If you are formerly registered with the ATO for the Goods and Services Tax, Council will pay 10% GST on top of your grant amount.

#### Is the applicant organisation registered for GST?

Yes

Your response to this question does not affect your eligibility. However, if you respond YES, your budget should include GST exclusive amounts. If you answer NO and are not registered, your budget should reflect GST inclusive amounts.

#### Financial information

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Council administers Community Grants as the custodian of public funds. As a result we are keen to know that recipients can manage funds and prioritise financial accountability.

#### Does the applicant organisation have a set of audited financial accounts for the previous financial period?

Yes

If you answer NO to this question, you may benefit from considering an auspice arrangement until you are able to demonstrate your financial management capacity.

#### Please attach your most recent financial statements

- [Autism Community Network Inc 2014 Audit Report.pdf](#) 177.6 kB
- [Balance Sheet 30 Jun 2014.pdf](#) 43.2 kB
- [Profit & Loss Summary 2014.pdf](#) 173.7 kB

If you do not have an electronic copy of your statements, create a Word Document that simply states that you will be mailing the report and upload that Word file.

#### Insurance coverage

We require that you have an appropriate level of insurance for any funded project that has the potential to cause harm or loss to those involved.

#### Do you already have insurance coverage for the type of project you are seeking funds for?

Yes

If yes, please upload a copy of your existing Certificate of Currency from your insurance provider.

- [Certificate of Currency ANSVAR NOVEMBER 2014\[4\].pdf](#) 160.1 kB

If no, please explain what risk management strategies you will have in place by 1 July 2014, including insurance coverage.

Must be no more than 100 words. Your response to this question does not affect eligibility. However, if you are successful in your application, evidence will need to be provided that you have planned appropriate coverage.

#### Contacting a Council Officer

We encourage all applicants to have discussed their application with a relevant Council Officer from the Community Capacity Building Team, City Animation Team, Recreation & Facilities Team or Heritage & Tourism Team.

| Council Officer name | Date of contact  |
|----------------------|------------------|
| Hatice Vural         | 14 November 2014 |

#### Strategic Alignment

##### Parramatta 2038 Community Strategic Plan

PCC Community Grants are designed to help achieve our vision for Parramatta in 2038. We are keen to know which aspects of the Parramatta 2038 Community Strategic Plan your project could make a contribution to.

For a copy of the Parramatta 2038 please call 9806 5110 or [click here to find it on our website](#).

Please indicate which of Council's Strategic Objectives your project contributes to

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PEOPLE - Parramatta will be a world-class city at the centre of Sydney that attracts a diversity of people: a city where people can learn, succeed and find what they need; a city where people live well, get together with others, feel like they belong and can reach their potential.

#### In what ways will your project contribute to this/these strategic objectives?

Autism Community Network aligns with Parramatta City strategic objectives.

According to Australian Bureau of Statistics (ABS) Census Data 2011, Approximately 466 families are affected by Autism in Parramatta LGA region.

Autism is a very restrictive condition requiring a high level of support on a daily basis. Parents and family are often socially isolated in caring for a person with autism.

The key goals for this project is to increase the social participation of people living with Autism and their families with in Parramatta LGA region. This goal aligns with the Parramatta City strategic objectives as follows:

1. Neighbourhood and belonging - by provision of social gatherings and support group meetings for parents and families caring for a person with autism.
2. Improve health outcomes - by holding activities in Parramatta local recreational venues.
3. Learning and development - by providing information about appropriate local services, early intervention.

Must be no more than 150 words. You will have more opportunity in the questions that follow to tell us about your project.

#### Geographic location

##### What locality is your project primarily happening in or benefiting?

Carlingford, Epping, Eastwood

#### Community Capacity Building categories

##### Category objectives

The Community Capacity Building category has three sub-categories:

Community Capacity Building - 100% Voluntary Organisations.

Community Capacity Building - Organisations with Paid Staff

Community Capacity Building - Second Phase Projects.

The objectives of these categories are to:

- **OBJECTIVE 1:** Support community based groups, sport and recreation clubs, and service organisations to develop effective projects that address the social, economic and/or environmental needs of residents in the Parramatta Local Government Area, as described in 'Parramatta 2038'.
- **OBJECTIVE 2:** Maximise access to and use of community resources, services and facilities, including equity of access for people experiencing social exclusion, marginalisation or isolation.
- **OBJECTIVE 3:** Encourage community participation in the development and delivery of projects and activities.
- **OBJECTIVE 4:** Support the development of networks and partnerships between communities, local community groups, agencies and Council.
- Additionally, **Second Phase Projects** aim to extend the objectives of a previously funded project into its identified second phase and to foster sustainable, long-term outcomes for the community. [This excludes simple repeating of a past project]

##### Which of the above objectives does your project meet?

Objective 1

Objective 2

Objective 3

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### Activity category

Please indicate which ONE activity category applies to your project:

**Activity category** A: Development of a project that will build resilient, vibrant and healthy communities in the Parramatta LGA

### Project Description

**What will your project do? [Include a description of how your project meets the above objective(s). What will take place and when will it take place?]**

Parramatta Autism Community Connect will deliver 11 x 2 hour support group meetings for parents/carers and 11 x 2 hour social gatherings in local parks for children and young people with Autism Spectrum Disorders.

These activities will:

1. Address 2038 Health and Recreation targets by providing a monthly recreation activity for children and young people. It will also address the Neighbourhood and Belonging target by offering a monthly activity for parents/carers, generating a sense of community and developing volunteering opportunities.
2. Maximise access to and use of community facilities by providing activities in local parks, cafes and clubs. Information about local services is gathered and shared amongst the group, facilitating access to appropriate local services.
3. Encourage participants to identify and develop projects which meet specific needs such as after school social skills building activities for their children. Encourage volunteering in the delivery of these programs.

Must be no more than 300 words

**Why does this work need to be done? [Describe the specific issue or need you want to address. How do you know it is a need? What community strengths does it build upon?]**

Lack of support for parents and carers of children with autism led a father of such a child with to establish Autism Community Network in 2011. The group provided much needed social support and grew rapidly to 650 member families across Sydney. 40 of these member families live in western Sydney but ABS SDAC statistics 2012 show that there are more than 4,000 families affected in the region.

Members have advised us that there is no support available in the area:

"I am in Parramatta and have been searching for a support group in this area, I have been following Elena's hills group (haven't attended any get together yet). I am very happy about the possibility of this group starting:) If there is anything I can help with, please let me know. Cheers, Kate- Parramatta"

"I live in Rydalmere and I don't know of any Autism Support/Parent groups in the area. I think this would be a great idea to have a group based here. Sincerely, Marama-Rydalmere"

These families face enormous challenges, both financially, socially, educationally and health-wise but are also resilient and, together, support each other and share information about appropriate strategies and services to help the children.

Must be no more than 200 words

**Who will benefit? [Who is the specific target population that will participate in and/or benefit from this project? What location? Think about the gender, age, suburbs or other demographics]**

Parents and carers aged 25-64years, living in Parramatta LGA and supporting children with autism will be our primary target group for the support group meetings. Through this group, we will also target children with Autism aged 2-18 years and their siblings to participate in social/recreational activities in local parks. In order to promote this group, we will also target local schools, doctors and community service providers that can refer families to our programs.

Must be no more than 200 words

**Who will you work with? [Who are your partners in this project? Have you asked for support from anyone else? Provide contact details.]**

Eastwood Rugby Club have offered to provide a venue for our monthly support group meetings. This project will enable us to make contact with service providers in the Parramatta area with a view to establishing after school activities in the local area for children with Autism as phase two of this project.

Must be no more than 150 words

**Estimate number of project participants**

100

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We encourage you to make this a realistic estimate.

#### **How will you engage the target groups and the broader community?**

We will invite local schools to participate in an Autism Awareness campaign. This will engage the broader community as well as promoting our activities to families who have children with Autism. We will also drop flyers to local doctors and community service providers to promote our activities. Once families have had a chance to work through some of their issues together, we will support them to access and/or develop the services that they feel are lacking in their area.

Must be no more than 150 words

#### **How will this project demonstrate an innovative or creative approach? [What continuous improvement strategies will be used?]**

Our families are often housebound because of the sensitivities and behaviours of their children. For this reason, in addition to our meetings and activities, we also offer on line services including our member generated directory of local service providers, parent/carer forums, email and Facebook groups.

Our Coordinator will report back after every activity with feedback from participants including any suggestions for topics, times, days, venues or activities to be incorporated into each session. Our Operations Manager will also attend 2 sessions over this time and will provide regular supervision and training to our Coordinator.

Must be no more than 150 words

#### **For Organisations With Paid Staff, please provide information about any staff costs you are applying for. Are you extending the hours of a current project officer? Will you seek to employ someone to implement this project?**

We will employ a local (Parramatta) parent/carer for 10 hours per month as our Coordinator to lead the group. We will also extend the hours of our Operations Manager to support the Coordinator and attend 2 sessions.

Must be no more than 150 words

#### **Second Phase projects *(Not Applicable)***

This section has been disabled because of your response to question: "Funding category" on page 2

This year, Council has created a new category to replace the multi-year option we had previously. If you have been successful in receiving a PCC Community Grant in the past, you can apply for the second phase of that project.

It is important to remember that Council does not offer recurrent funding, so you will not be funded to run the same project again. There needs to be a clarity that the project has grown or developed as a result of what was learnt the first time around.

If your application is found to not meet the criteria for a Second Phase Project, it will be considered in a category in which it is eligible.

#### **When did you receive funding from Parramatta City Council for the first phase of this project?**

If your project was funded in the last PCC Community Grants round, you are eligible to apply for second phase. Your progress reports will be considered in assessment.

#### **What were the outcomes and community benefits from the first phase of your project?**

Must be no more than 200 words. If your first phase is not yet complete, please provide as much information as you can.

#### **How does this second phase differ from the first phase of the project?**

Must be no more than 150 words

#### **What did you learn in implementing the first phase of your project and how are you applying those lessons to this second phase?**

Must be no more than 150 words

### **Work Plan and Evaluation**



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#### Project workplan

Please complete the below project work plan that includes:

- **Project milestones** - What are the key milestones/stages to be reached in order to achieve your project outcomes?
- **Tasks / Actions** - What are the important tasks that need to be done in order to reach each milestone/stage?
- **Performance indicator** - How will you measure the success of this milestone/stage?
- **Timeframe**- When will it be done by?

If you have any questions regarding this work plan, please contact the Community Capacity Building Team on 9806 5110.

**Add a line for each new Milestone / Stage. Please complete a minimum of two Milestones and a maximum of six.**

#### Milestone / Stage

Support Group

Tas  
Rec

#### Milestone / Stage

Support Group

Tas  
Lock

#### Milestone / Stage

Support Group

Tas  
Run

#### Milestone / Stage

Social/recreational activity

Tas  
Plan

#### Evaluation

##### How will you know if your project is successful?

Attendance at Support Group meetings and Social/recreational activities will demonstrate the success of the project. Participant feedback on activities provided, topics covered, times/days/venues etc will be gathered monthly. Level of volunteering from group participants and contribution of ideas and resources to improve service delivery will also measure project success.

Must be no more than 300 words

#### Budget

##### Other funding sources

In addition to the amount you are applying for from Council, we are keen to know the full costs of projects and how the other parts are funded.

##### What are the other funding sources? If you are applying to other funding bodies, when will you know the result?

##### What financial contribution is your organisation making?

We will apply to Carers NSW Together program for funding to purchase resources for the group including an iPad for the Coordinator to demonstrate use of our website and other apps used to support children with Autism. This funding will also contribute to meeting participant costs of attendance such as transport etc if required, catering for an end of year event and to meet some administrative costs such as insurance. This funding is normally available from about August each year.

Must be no more than 150 words

##### What are the in-kind contributions being made to your project?

Eastwood Rugby Club have offered use of their venue for our Support Group meetings. We anticipate that many schools and community services organisations will also promote our activities through their newsletters and networks.

Must be no more than 150 words. This may be a venue that is being donated, or a graphic designer doing your work for free. You may also indicate the volunteer hours that are being contributed to the project or the paid staff time going into the project.

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#### Venue hire information

Details regarding venue or facility hire.

#### What venues/facilities are you planning on using? Have you already made a booking or enquired about their use?

Eastwood Rugby Club have agreed to support us through use of their venue for our Support Group meetings. We anticipate that other activities will be held in local, Council run parks.

Must be no more than 100 words

#### Project budget

Applicants must provide accurate financial information as part of the submission process. It is important to demonstrate that your application is financially viable, and that the project can be successfully delivered within the budget specified. Please prepare your financial information carefully, as errors may jeopardise the success of your application. Please ensure that your budget shows which parts of your project you want Parramatta Council to fund and which parts are funded from other sources (including in-kind).

- If you are registered for the GST, costings should not include GST
- If you are not registered for the GST, costings should be inclusive of GST. All Creative Fellowship applicants should include GST in their costings.

| Expenditure item   | To be paid for by PCC Grant funds | To be paid for by other funding source |
|--|-----------------------------------|--|
| Coordinator 10 hrs x 12 months @ \$30/hr incl on-costs           | \$3,600.00                        | \$                                     |
| Operations Manager 1 hrs x 12 + 2 x 3hrs @ \$50/hr incl on-costs | \$900.00                          | \$                                     |
| Staff travel   | \$100.00                          | \$                                     |
| Printing and postage   | \$200.00                          | \$                                     |
| Catering   | \$                                | \$400.00                               |
| Travel   | \$                                | \$200.00                               |
| iPad and cover   | \$                                | \$500.00                               |
| Administration including insurance and audit                     | \$                                | \$400.00                               |
|  | \$4,800.00                        | \$1,500.00                             |

#### Declaration

#### Acknowledgement by office bearer of Applicant Organisation

*Applicants in the Parramatta Creative Fellowship Fund should sign as themselves.*

By adding my name to this form, I declare that I am an authorised office bearer of the applicant organisation.

I declare that the information in this application is, to the best of my knowledge, true and presents fairly, in all material respects, the financial position of the organisation. I will notify Parramatta City Council as soon as the organisation becomes aware of any changes to this information or any circumstances that may affect this application but not limited to information regarding the financial viability of the organisation.

I acknowledge that Parramatta City Council may seek further information regarding this application if required.

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

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Note: *The principal office bearer of the applicant organisation (or the auspicing organisation) will be required to sign the funding agreement accepting responsibility for the delivery of the project*

**Authorised office bearer** Mr Warren Thompson  
**Position** President  
**Email** warren@autismcommunity.org.au  
**I, the above office bearer, agree to the above declaration.** Agreed  
**Date of acknowledgement** 01/12/2014

### Applicant Support

**Grants Support and Monitoring Program:** Parramatta City Council is committed to achieving industry best outcomes in partnership with grant recipients. To achieve this, Council coordinates a Grants Support and Monitoring Program to strengthen the community sector in Parramatta. The program has four components:

- Grants monitoring – ensuring implementation of relevant Council policies and protocols, assisting Council Officers to effectively target support and resources to grant recipients and identify delivery and/or reporting challenges.
- Individual support and consultancy – a Council Officer is matched to each applicant who receives the offer of tailored advice and support as required.
- Professional development workshop program – covering relevant topics for potential grant applicants e.g. grant writing, showcasing of successful community capacity building projects, auspicing, philanthropy, evaluation and leadership.
- Community Capacity Building email information network – used to distribute information on funding and professional development opportunities.

**In the past 12 months, have you attended one of Council's regular grant writing workshops?**

No

### Please remember to SUBMIT

If you have completed all questions, click NEXT PAGE to review your application. Please remember to hit the SUBMIT button. Smarty Grants will alert you if there are compulsory questions that you have not completed.

When you hit submit you will receive a confirmation e-mail. If you do not receive this confirmation, you may not have submitted successfully.