Operating Subsidies Application Form

About

An operating subsidy is a cash payment contract (up to three years) and/or peppercorn lease made by the Town to an eligible party. The purpose of the operating subsidy is to support the operating capacity of not-for-profits and social enterprises to deliver programs, initiatives and services from a strengths-based perspective in partnership with the local community across one or more of the identified priority themes.

The following Primary and Secondary operating subsidy priority themes are included for this round:

Primary:

- Youth development / services
- Seniors / aged
- Arts and Culture
- Community Safety

Secondary:

- LGBTQI+
- Multicultural

Strengths based approaches are to encompass one or more of the following elements in order to create value from a positive social impact, delivered with, through the local community / target audience:

- community engagement and social connection,
- capacity building and skill development,
- supporting system identification, alignment and improvement, and
- seeks out collaboration and partnering.

Operating Subsidies are capped at 50% of total operating costs, to a maximum of \$100,000 + gst, per year. This is inclusive of cash, in-kind support relating to subsidised rental value of the lease forfeited under a peppercorn lease. Please refer to the operating subsidy toolkit and Policy 114 Community Funding. for more information.

Operating subsidies are funded by 1% of the Town's rates income. The total funding pool for this round is estimated at \$145k per annum, pending the final rate-able amount for the 2025-2026 financial year.

Organisations with an existing operating subsidy with the Town until June 2026 are ineligible to apply within this round.

Please contact the Grants Officer for more details on 9311 8114.

Before completing this application form, you should have read the <u>operating subsidy</u> toolkit and Policy 114 <u>Community Funding</u>.

Incomplete applications and/or applications received after the closing date will not be considered.

The following section of the application form is designed to help you, and us, understand if you are eligible for this grant. It's crucial that you complete these questions first to ensure you are eligible for consideration.

If you have any questions in regards to the eligibility criteria, please contact the Town's Grants Officer on 9311 8111 or by email admin@vicpark.wa.gov.au

Contact Details

* indicates a required field

Privacy - Use of disclosure of personal information

Any personal information we collect through victoriapark.wa.gov.au may be used or disclosed for the primary purpose for which it was collected, for example to allow us to answer your enquiry or process your transaction.

Personal information will be dealt with in accordance with the applicable legislation in Western Australia and consistent with any legal obligation.

To view our privacy statement go to victoriapark.wa.gov.au

Applicant organisation details
Applicant organisation name * Organisation Name
Applicant role in organisation
Applicant Primary Address Address
Applicant Primary Phone Number
Must be an Australian phone number.
Applicant Primary Email
Must be an email address.
Applicant Primary Website

Must be a URL.
Applicant Postal Address Address
Criminal Convictions
The respondent must disclose whether the applicant or any other party specified personnel directly involved with the applying party has been convicted or a criminal offence that is punishable by imprisonment or detention. Spent convictions under the Spent Convictions Act 1998 (WA) or equivalent legislation of another State or Territory of Australia are not required to be disclosed.
Has any person described in above been convicted of a criminal offence that requires disclosure under this section? * □ Yes □ No
If yes, provide details
Conflict of Interest
The applicant must declare and provide details of any actual, potential or perceived conflict of interest.
Are there any circumstances, arrangements or understandings which constitutes, or may reasonably by perceived to constitute, an actual or potential conflict of interest with either the applicant's obligations to adhere to the Funding Agreement or which may unduly impact the application? If an Elected Member works for or resides on an applicant's Board of Management or similar governing body, this must be declared as a conflict of interest, as Operating Subsidies will be considered by Council. * Yes No
If yes, please provide sufficient details as to how the actual or perceived conflict of interest arises

Organisation Details

* indicates a required field What is your organisation's purpose or mission? * Does the organisation have public liability insurance to the value of \$20,000,000 (20) million dollars? * □ Yes □ No Please upload the organisation's public liability insurance certificate * Attach a file: Does the organisation have workers compensation insurance? * □ Yes □ No Please upload the organisation's workers compensation certificate * Attach a file: Does the organisation have personal accident for volunteers insurance not less than \$100,000 per person for death or permanent total disablement and weekly compensation entitlements for employment and self-employed volunteers of an amount up to 1% of the capital sum?* □ Yes □ No Please upload the organisation's personal accident or volunteers insurance certificate * Attach a file: Does the organisation have personal accident for volunteers insurance of an amount no less than \$20 million for any one occurrence or accident ? * □ Yes □ No Please attach the organisation's personal accident for volunteers insurance certificate * Attach a file:

ABN
Does your organisation have an ABN? * ☐ Yes ☐ No
ABN
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.
Information from the Australian Business Register
ABN
Entity name
ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Must be an ABN.
No ABN
If you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from the ATO.
Please upload completed Statement of Supplier Form: Attach a file:
Is the organisation GST registered? ☐ Yes ☐ No
What is your incorporation number?
Incorporated Association or Australian Corporation Number
Please upload Certificate of Incorporation Attach a file:

What type of not-for-profit organisation are you?

□ Not-For-Profit□ Social Enterprise

New Section

Please choose the option that best applies to your organisation.

Auspice Information

Unincorporated Organisations

Unincorporated organisations applying for this funding must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this funding.

Auspice details for unincorporated organisations

ual ion Name	○ Organisation	
First Name	Last Name	
	ion Name	ion Name

Auspice ABN

A

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

Information from the Australian Business Register		
ABN		
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration		
Tax Concessions		
Main business location		

Must be an ABN.

If the auspice organisation does not have an ABN, please submit a completed Australian Taxation Office (ATO) Statement by a Supplier form with your

application, otherwise 48.5% of any approved grant may be withheld. Download the form from: Statement by a supplier - ATO form Attach a file:
Auspice Primary Address Address
Auspice Primary Phone Number
Must be an Australian phone number.
Auspice Primary Email
Must be an email address.
Auspice Primary Website
Must be a URL.
Please attach a letter from the auspicing organisation confirming this arrangement is valid and current Attach a file:
Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.
Previous Town of Victoria Park Funding
* indicates a required field
Has your organisation received funding from the Town of Victoria Park within the last three years? * ☐ Yes ☐ No
List previous grants you have applied for over the last three years with the Town (grant year/project name/successful or unsuccessful /amount received

Town's requirements * Yes all forms have been submitted and approved No, there are acquittals still outstanding
Planned Initiatives
* indicates a required field
Q1. What initiatives do you specifically aim to deliver as a result of receiving an operating subsidy? What will you have capacity to deliver due to receiving an operating subsidy that you would not normally be able to? *
Q2. Purpose: Why does your service exist? *
Q3. Client profile: What information can you provide about the demographics of the clientele who use your services? For example, age, gender and whether they are residents of the Town of Victoria Park. *
Q4. Service gap / duplication: Is your service a duplication of a service that already exists in the community? Are you addressing a service gap in the community? If so, how can you demonstrate this? *

Alignment to Victoria Park Strategic Community Plan

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/or intermediaries) of your project. Generally, outcomes can be framed as an increase or decrease in one or more of the following:

• Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)

- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Immediate outcomes occur directly following an activity (e.g. within 1 month); medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

Your outcomes	Alignment with our outcomes	How does your intended outcome link to our outcomes?
What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row.	Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. No more than 1 choice may be selected.	Please explain how your intended outcome helps contribute to ours.

Town of Victoria Park Outcome Measures

These measures indicate whether or not progress towards an outcome is occurring, and quantify the extent to which it is occurring. Here we would like you tell us which of our quantitative measures you will be able to report on.

Metric	Target	Collection method
Which of our measures will you track? You may be required to report on your progress. Add more rows if you want to list additional metrics. No more than 1 choice may be selected.	Identify a target for the measure you have chosen - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. survey, interviews/ case studies, focus groups, administrative data (e.g. case management data), observation/ estimation, government or public dataset (e.g. Census), other datasets.

Theory of change

A theory of change describes how one activity (or a series of activities), when carried out in a certain way, will or may lead to a particular outcome. A theory of change can be provided in written or diagrammatic form.

By outlining your theory of change – why you believe the activities you carry out will produce the outcomes you seek – you can help us understand why funding the work you do may contribute to producing a social, economic or environmental change.

Theory of Change	Evidence	Explanatory notes
Please explain why you believe	Provide evidence (where	Add notes if you need to provide
the activities you propose	relevant) of the link between	more context.

the work you will do and the outcomes you seek.	

Unintended negative outcomes

It is difficult to know at the outset of a project all the changes it may generate. Some unintended outcomes are welcome, some are not.

Here we would like you to reflect on any negative unintended outcomes that you expect may emerge, and how you will mitigate the risk of this happening.

Unintended outcome	Mitigation actions	

Your metrics

A metric is a measurement designed to indicate whether or not progress towards an outcome is occurring, and quantify the extent to which it is occurring.

You may add your own metrics here.

There are two types of metrics. An 'Outcome Metric' is a measurement designed to help you determine whether progress towards an outcome is occurring or not, and quantify the extent to which it is occurring. An 'Activity Metric' tells you how much of something you're doing or producing ('outputs' are often Activity Metrics, for example.)

Metrics work best when they:

- Are quantifiable/numeric
- Are clearly defined and succinct
- Contain all the context needed to gauge and compare the result (e.g. unit [e.g. cm, metres, people, people-days, %, etc]; direction of change [increase; decrease; etc.]; timeframe [e.g. per month; per year; etc])
- Have been tested, and/or are in common use, and/or are commonly understood as a relevant and useful indicator of performance in a particular arena
- Are used sparingly you are much better off to ""ask one good question and answer it reliably"" than try to track many things at once
- Relate to a clearly articulated outcome or activity.

Metric	Type of metric	Target	Collection method	Explanatory notes
One per row. Add more rows if you want to list additional metrics.	measure the	have chosen - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. survey, interviews/ case studies, focus groups,	Add notes if you need to provide more context.
	change experienced by a population group (e.g.		administrative data (e.g. case management	

'Number of young people gaining employment').	data), observation/ estimation, government or public dataset (e.g. Census), other datasets.	

Qualitative evidence

Qualitative evidence is a descriptive rather than numeric form of evidence designed to indicate whether or not progress towards an outcome is occurring.

Examples of qualitative data sources include interviews, testimonials, focus group transcripts/summaries, social media posts, media appearances/mentions, and artistic or multimedia depictions such as photographs, videos and audio/podcasts.

Qualitative evidence	Explanatory notes
Select the type of qualitative evidence you will	Add notes if you need to provide more context.
use to help track your progress. One per row. Add	
more rows if you want to list additional types of	
qualitative evidence.	

Activities

Tell us about the activities you will undertake in order to create change. List one per row.

You can stipulate one location for each activity. If you have one activity taking place in multiple places, you can either list each location as a separate activity (e.g. Breakfast Club #1; Breakfast Club #2, with a specific location attached to each), or you can list one activity with a generalised location (e.g. "Melbourne CBD").

Activity	Location	Will this activity be delivered online?	Explanatory notes
One per row. Add more rows if you want to list additional activities.	Where will your activity occur? Leave blank if location is unknown or not relevant.	Pick one option.	Add notes if you need to provide more context.

Budget

Total Amount Requested	\$ What is the total financial support you are requesting in this application?				
	Please state the total funding amount being requested If the applicant is leasing or would like to lease a Town asset with a peppercorn lease, the value of the peppercorn lease must be included in this application. The value of the peppercorn lease can be obtained from the Towns Property team.				
	*Peppercorn lease means a subsidised nominal rental amount which is significantly below the market valuation. Thus forfeiting revenue in return for social benefits for the community (to be informed by cost-benefit analysis).				
Total Project/Program	\$				
Cost	What is the total budgeted cost (dollars) of your project?				
documentation to support y Attach a file:					
In Kind Support from the	e Town				
Types of In-kind support are:					
• The use of Town's assets	ilities (Town's Parks and venues) through the Town's Communications team.				
If No In-kind Support put \$0.00					
Item Description					
	Estimated Amount Must be a dollar amount				
	Estimated Amount Must be a dollar amount.				

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Budget Totals

Total estimated in k	ind amo	ount				
This number/amount is c	alculated					
Budget						
Income	\$		Expen	diture	\$	
Operating Subsidy amount Source of other funding						
Budget Totals						
Total Income Amount		Total Expenditure Amo	unt	Income - Ex	openditure	
This number/amount is calculated.	ount is This number/am calculated.		unt is	This nun calculate	nber/amount is ed.	
Applicant Capac	ity					
		Please prov		ink to or attac al Report.	ch a copy of	your
		with your mo a Profit and I	st rece oss Sta	te an annual rep nt financial stat atement / Stater Balance Sheet /	ements (may ment of Finan	include cial
Provide Annual Report		Attach a file:				
Provide web link		Must be a URL	-			
Supporting Mater	ial					
Please provide the following	owina da	ocuments:				

Program Logic Model

• Evaluation Plan

Must be an email address.

Please use the online resource at the <u>LotteryWest Community Impact Hub</u> to create these documents, which will also include your Theory of Change.

Please note that an application is not considered complete without the above additional information being provided. Should you have any questions on how best to provide this information please contact the Towns Grant Officer on (08)9311 8111.

(00,0011 01111			
Please add files he	re		
Referee Details	, Supporting Mat	erial, Code of Co	nduct
Referee Details			
worked with the Appli	ired to provide the contaicant in the delivery of sine Town, for verification	services or in an operat	
Referee One			
worked with the Appli	ired to provide the contricant in the delivery of sine Town, for verification	services or in an operat	
Name ○ Individual Organisation Name	○ Organisation		
First Name	Last Name		
Position			
Address Address			
Fmail			

Phone N	umber				
Must be ar	n Australian pho	ne nu	umber.		
Referee	e Two				
Name Ondivide Organisat	ual (tion Name	⊃ Org	ganisation		
	E' N				
Title	First Name		Last Name		
Position					
Address Address					
Email					
Must be ar	n email address				
Phone N	umber				
Must be an	n Australian pho	ne ni	ımber.		

Supporting Material

Please provide the following documents:

- Risk Management Strategy
- The organisation's latest Annual Report
- Two most recent audited financial statements
- Evidence of permission or support for your activity (if required)
- Details about previous grants received from the Town of Victoria Park (if required)
- Additional budget items and information (if required)
- Additional in kind support (if required)
- Any other information that you think will assist the Town in assessing your application

Please note that an application is not considered complete without the above additional information being provided. Should you have any questions on how best to provide this information please contact the Town's Grant Officer on (08) 9311 8111.

Please add files here Attach a file:			
Code of Conduct			
As a grant recipient you are considerable to assist you and want to involved. Both the grant recipier of conduct. Please read carefully moving forward with your applications.	ensure the nt and Tow the follow	at the grants proce n will be held acco	ess is an enjoyable one for all untable to the following code
As a grant recipient I/We will:			
 be open and accountable present in a professional ma treat others with respect and be accountable act lawfully, with honesty ar 	d fairness	,	
Please indicate your commitr ☐ We agree ☐ We do not agree	ment to u	pholding this cod	le of conduct
Certification and Feedb	ack		
* indicates a required field			
Certification			
This section must be completed the applicant organisation (may application form).			
I certify that to the best of mapplication are true and correorganisation is approved for and conditions of the grant a	ect, and I this grant	understand that t, we will be requ	if the applicant ired to accept the terms
l agree *	○ Yes		○ No
Name of authorised person *	Title	First Name	Last Name
		senior staff member, I volunteer	board member or appropriately
Position *	Position he	eld in applicant orgar	nisation (e.g. CEO, Treasurer)

Contact phone number *	Must be an Australian phone number. We may contact you to verify that this by the applicant organisation	
Contact Email *		
	Must be an email address.	
Date *		
	Must be a date	
Applicant Feedback		
	oplication process. Before you reviewake a few moments to provide son	
Please indicate how you found ○ Very easy ○ Easy	d the online application proces O Neutral O Difficult	S: O Very difficult
How many minutes in total di	d it take you to complete this a	application? *
Estimate in minutes i.e. 1 hour = 60		
•	uggestions about any improve rocess/form that you think we	