

Cash Donations 2024/25

Form Preview

CASH DONATIONS 2024-2025

* indicates a required field

Before you begin

Welcome to the City of Swan's Grant and Sponsorship Program.

Before starting your application, please read the [Resource Guide and the Swan Cash Donations Information Sheet](#) for eligibility and assessment criteria.

You are invited to discuss your application with the Community Grants Team prior to submission. Please call (08) 9207 8693 or email communitygrants@swan.wa.gov.au, as they are ready to help you if needed.

Please allow **8** weeks for your application to be processed. Applications that are incomplete or received outside the minimum lead-time may not be processed in time. Applications received after event dates are not eligible for funding.

Eligibility

We are committed to strengthening our community by supporting activities, initiatives, projects and events to enhance the lives of our residents and the broader City of Swan community.

We are excited to support personal achievements and selection in competitive endeavours such as sport, education, environment, culture and the arts at an International, National or State level.

Please note once this application has been submitted this cannot be updated or changed, a confirmation email will be sent.

Eligibility:

- City of Swan resident
- No outstanding debts (Good Standing) with Swan
- Genuine activity and individual evidence of selection

Funds available until budget line is depleted.

Applicant Details

Privacy Notice:

The City of Swan pledges to respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the Privacy Act 1988 and amended by the Privacy Amendment (Enhancing Privacy Protection) Act 2012. To view our privacy statement, go to <https://www.swan.wa.gov.au/General/Legal/Privacy-Statement>.

Primary Applicant *

Title First Name Last Name

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Applicant Primary Phone Number *

Must be an Australian phone number.

Applicant Primary Email *

Must be an email address.

Applicant Primary Date of Birth *

Must be a date.

Applicant Primary Bank Account *

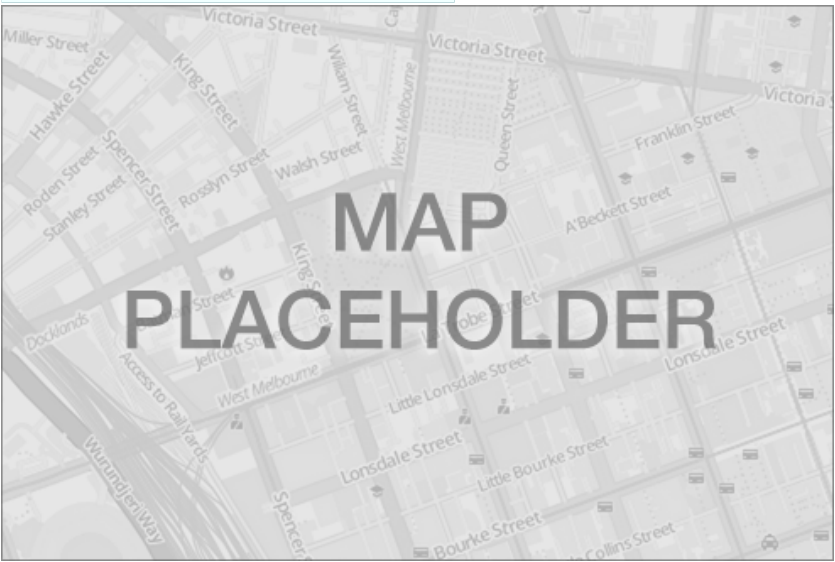
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Applicant Primary Address *

Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Please attach proof of address *

Attach a file:

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You can attach a copy of a drivers license, proof of age card, bank statement, student card, etc. As long as it has your residential address on the document we can use it.

Do you identify as

- | | |
|--|---|
| <input type="checkbox"/> a person living with a disability | <input type="checkbox"/> speaking a language other than English at home |
| <input type="checkbox"/> a person of Aboriginal or Torres Strait Islander decent | <input type="checkbox"/> None of these |
| <input type="checkbox"/> part of the LGBTQIA+ community | |

This is a non-compulsory question used to identify members of the community this donation reaches to monitor the equity and fairness of the donations distribution. Answering this question will not effect the assessment of your application.

Event Details

* indicates a required field

Competition or Activity Title *

Where is the Competition / Activity taking place. *

Website *

If you have it please include a website link to the competition

Start Date *

Must be a date.

End Date *

Must be a date.

Estimated cost of attendance

\$

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

How much are you requesting? *

- ☐ \$250 - State Representation or Selection (WA) ☐ \$350 - National Representation or Selection (Australia) ☐ \$500 - International Representation or Selection

Selection process

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How were you selected? Please describe what the selection process was. *

Word count:

Must be no more than 100 words.

Please describe what the selection process to be chosen to compete or perform in this competition.

Please upload a copy of selection letter. *

Attach a file:

This can be from your Club, Organising Agency, Representative Team etc. inviting you by name to participate.

Declaration

Declaration

If your application is successful you will be notified by the Community Grants Team and paid into your nominated bank account, please ensure these details are correct.

A maximum contribution of \$500.00 to any individual within any financial year applies

☐ I understand

If you have already received \$500 in 2024/2025 you will be ineligible for any further funding from this Stream in this financial year.

I acknowledge the information provided throughout this form is true and correct

☐ True

☐ False

Good News Stories

The City would love to run a story about your experience on our Website or Social Media Page. We would love to hear about your experience please send in photo's and a short story about your experience to communitygrants@swan.wa.gov.au