



Rural Women's Community Grants 2009 Application Form

**Supported by
Women in Agriculture and Business,
Women's Information Service,
PIRSA, Rural Affairs**

Please Note:

Applications must be:

- Submitted on the forms provided;
- Received in full;
- Include relevant attachments;
- Post marked; delivered on or before the closing date.

Please forward applications via post, email or fax to:

Address: **RWC Grants 2009
PIRSA Rural Affairs
GPO Box 1671
ADELAIDE SA 5001**

Facsimile: **(08) 8226 0425**

Email: **pirsa.wab@saugov.sa.gov.au**

APPLICATION FORM

1 COVER SHEET

- 1.1 Name of organisation:
- 1.2 Project Title:
- 1.3 Location/s where the project will be held:
- 1.4 Commencement date of project:
- 1.5 Total time period of project:
- 1.6 Total funding request: \$.....

2. APPLICANT DETAILS

2.1 Briefly describe the aims and activities of your organisation

- 2.2 Are you a not-for-profit organisation? YES NO
- 2.3 ABN:
- 2.4 Legal Status:
- 2.5 Have you attached a copy of your Certificate of Incorporation? YES NO
- 2.6 Your organisation's contact details:
Address:.....
Phone:Facsimile:.....
E-mail address:
- Contact person and position:

4 PROJECT AND WORK PLAN

4.1 Description of proposed project

Please provide a brief description of the proposed project:

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4.3 Project benefits

a) Please detail the intended outcomes of the project.

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5 FUNDING AND BUDGET

5.1 Project Budget:

Total Project Budget:
 Total grant requested \$ _____
 Total project budget \$ _____

Proposed Expenditure	Description	\$ Amount
Administrative Cost		
Advertising/publicity		
Printing		
Venue/s		
Travel		
Other		
Total Expenditure		\$

9 DECLARATION BY ORGANISATION'S REPRESENTATIVE

- The information given in this application is true and correct to the best of my knowledge.
- I am duly authorised to make this application
- I have read and understood the requirements of the *Rural Women's Community Grants 2009 Guidelines*
- I understand that the funding bodies may seek clarification of any aspect of this application.
- If successful, I agree to complete reporting requirements within the specified time.
- This organisation will contact the funding bodies immediately if any information in this application changes or is found to be incorrect.

.....
(Signature)

...../...../.....
(Date)

.....
(Print Name)

.....
(Position in organisation)