

The Power of Her - Infrastructure Stream 2024-25

Form Preview

2024-25 The Power of Her Infrastructure and Participation Program (IPP) - Infrastructure Stream - Application Form

* indicates a required field

IPP Infrastructure Stream

THIS APPLICATION IS FOR INFRASTRUCTURE ONLY

I confirm I am applying for the infrastructure stream *

☐ Yes - I am applying for the infrastructure stream

☐ No - I am looking to apply for the program and equipment stream

Program

This field is read only.

Application Introduction

Introduction

This application form is for the IPP Infrastructure Stream 2024-25.

Objectives

The infrastructure stream will provide funding for the development of functional, inclusive and fit for-purpose female friendly sport facilities that meet the current and future needs of the South Australian community.

Time required to submit the application

This application requires multiple attachments and supporting information to complete and submit.

It is expected that the time required to coordinate the quotes, support letters, plans, financial documents and other relevant attachments can take in excess of 10+ hours. The Office for Recreation, Sport and Racing (ORSR) suggests that applicants take this into consideration when planning to submit an application.

Application Form layout

- 1.Introduction
- 2.Organisation Details
- 3.Additional Eligibility
- 4.Project Proposal
- 5.Project Costs and Funding Sources
- 6.Project Need
- 7.Participation & Utilisation
- 8.Facility & Land Details
- 9.Strategic Justification
- 10.Project Delivery and Maintenance
- 11.Declaration and Submission

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Eligibility

Before completing this application form, you must read the program [guidelines](#).

Completing an application

If you need further guidance in the application process, are unable to submit the SmartyGrants application or wish to withdraw a submitted application, you can contact ORSR via email or phone: ORSR.Grants@sa.gov.au or 1300 714 990.

If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Key specifics to get correct

Applicants must ensure the following;

- The applicant's legal name is entered exactly how it appears on the ASIC Registers website.
- The applicant's Australian Business Number (ABN) is entered correctly and matches the legal name.
- If you do not have an ABN, you will need to submit a completed Australian Taxation Office (ATO) Statement by Supplier Form with your application, otherwise 46.5% of any approved grant may be withheld. Download the Statement by Supplier form from the ATO.
- Check that all the questions have been answered and all essential documentation is attached.
- Press submit once you have completed the application. Amendments can be made prior to the closing date upon request.

Ensure you follow the helpful hints on each question within the application form as well as the following tips:

- Keep your responses to the questions clear and concise. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.
- Prioritise your writing to ensure the most critical information is in a prominent position.
- Use dot point writing where possible.
- Assume the reader is not familiar with your project.
- Additional documents should be directly referenced within the application.
- Accurately label attached files and avoid use of acronyms.
- Collate documents into singular files where possible e.g. attach one collection of photos in one file rather than uploading multiple individual photos.

Organisation Details

* indicates a required field

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Organisational Details

What is the legal name of the organisation submitting this application? *

Organisation Name

Please ensure your organisation name is entered as it appears on your Certificate of Incorporation. If you are unsure, please search for your organisation name under the "Organisation & Business Names" drop down option on the Search ASIC Registers website below

IMPORTANT: Abbreviations such as 'Inc.' will NOT be accepted. Please ensure you enter the name EXACTLY how it appears according to the ASIC Registers website:
https://connectonline.asic.gov.au/RegistrySearch/faces/landing/SearchRegisters.jspx?_adf.ctrl-state=nfiqptagw_20
https://connectonline.asic.gov.au/RegistrySearch/faces/landing/SearchRegisters.jspx?_adf.ctrl-state=ijte80jlp_4

Please select what type of organisation you are *

What is the organisation's total membership? (Where applicable)

Must be a number.

Membership / or Associations

Has the organisation submitting this application been operating for longer than 12 months? *

☐ Yes

Organisation Postal Address *

Address

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

Organisation Primary Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Name of Banking Institution *

Organisation Primary Website *

Must be a URL.

If you do not have a website please link us to your Facebook page.

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Executed License or User Agreement

If the applicant is a school council/board of management, the applicant must provide evidence of an executed license or user agreement (minimum of 5 years) with a club or association that provides access to the facility outside of schools hours.

Please upload executed License or User Agreement *

Attach a file:

ABN

ABN details

If you require further assistance, please check the [ABN Cheat sheet](#)

Please confirm which statement is relevant to you *

- ☐ Our organisation has an ABN as per the Australian Business Register website
- ☐ Our organisation does NOT have an ABN and therefore needs to complete the Statement by a Supplier Form

If you require further assistance, please check the ABN Cheat sheet

Only complete this question if you HAVE an ABN.

Applicant 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	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Only complete this question if you DO NOT have an ABN: Statement by a Supplier Form

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As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 46.5% of any approved grant may be withheld. Download the Statement by Supplier form from [the ATO](#).

Please upload completed Statement of Supplier Form: *

Attach a file:

Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet).

This statement must be for your most recently completed 12-month period.

Failure to provide this information correctly may result in your application being deemed ineligible.

If the Club's Treasurer is looking for assistance the following are useful;

[Guide for Community Financial Officers in Australia](#) (CA Australia, New Zealand)

[A Guide to Understanding the Financial Reports of Not-For-Profit Entities](#) (CPA Australia)

[Example of Profit and Loss \(Income and Expenditure\)](#)

[Example of Balance Sheet](#)

BANK STATEMENTS AND BANK RECONCILIATION REPORTS WILL NOT BE ACCEPTED.

I am providing my Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet) by: *

☐ Weblink

☐ Attaching a file

If the Financial Reports attached are not audited or certified (signed by the Treasurer), I electronically certify these attached reports for consideration. *

☐ Yes

Online - Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet).

Weblink - Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet). *

Must be a URL.

File Upload - Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet).

File Upload - Attach a Statement of Financial Performance (Income and Expenditure Statement) and Statement of Financial Position (Balance Sheet)+ *

Attach a file:

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Child-safe environment

Child protection legislation in South Australia requires certain organisations to provide a child-safe environment. All state authorities and persons or bodies who provide a service or undertake an activity that constitutes child-related work under the Child Safety (Prohibited Persons) Act 2016 must meet these obligations.

To meet the requirements under the Children and Young People (Safety) Act 2017 and the Child Safety (Prohibited Persons) Act 2016, these organisations must have a child-safe environments policy in place, meet working with children check obligations and lodge a child-safe environments compliance statement.

For further information please click [here](#).

Does the submitting organisation or its governing body hold a Child Safe Environment Compliance Statement? *

- ☐ Yes ☐ No ☐ Our organisation does not provide services or activities that constitutes child-related work

If your organisation does not provide services wholly or in part to members or participants under 18 years of age, choose "Our organisation does not provide services or activities that constitutes child-related work".

Additional Eligibility

* indicates a required field

Club Culture Assessment Tool

To be eligible for the IPP, your organisation must complete the [Club Culture Assessment Tool](#).

To ensure our sporting clubs are inclusive, safe and welcoming for everyone, it is critical that we engage with people who are actively involved in community sport and recreation to understand the current state of play in club land in relation to club culture, issues experienced and how these can be addressed.

The Club Culture Assessment Tool takes around 10-15 minutes to complete, and there are opportunities to provide extended answers.

Please fill this in by clicking the [Club Culture Assessment Tool](#) here.

Has your organisation completed the Club Culture Assessment Tool? *

- ☐ Yes ☐ No

Current female sports teams or programs.

To be eligible for the IPP applicants must have a minimum of two current female sports teams or programs.

Provide details and evidence of all current female sports teams or programs.

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Name of team or program	Activities of team or program	Number of teams or programs	Evidence of team or program
	I.e Soccer, Netball, Cricket, ect	Must be a whole number (no decimal place).	This could be a letter from SSO or association confirming participation.

Project Proposal

* indicates a required field

Project Title *

Word count:

Must be no more than 20 words.

E.g. To construct a new change room facility at the Joe Blogs Reserve, Adelaide

Please provide a short summary of your initiative *

Word count:

Must be between 50 and 100 words.

Provide a short description of your project - Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes). Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

What is the project facility category *

- ☐ New/Upgraded changeroom/s
- ☐ Aquatic facility
- ☐ Playing surfaces
- ☐ Water or energy saving initiative
- ☐ Lighting
- ☐ Other:

At least 1 choice must be selected. Projects that select 'other' may be contacted during the screening stage to ensure the project is eligible. If your project falls outside the listed please contact Funding Services on 1300 714 990 to find out if your project is eligible.

What is the estimated useful lifetime of the proposed facility? *

Must be a number.

Provide answer in estimated years. In certain cases you will be able to consult your manufacturer to provide an estimated lifetime.

Infrastructure Details

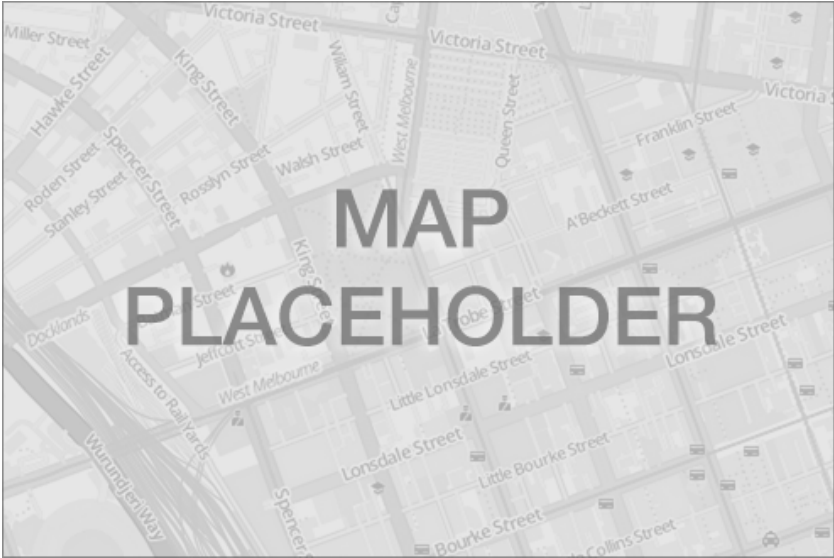
Facility Name *

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Applicant Facility Address *

Address



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

Local Council

State Electorate

Land details

All projects must evidence written consent from the Landowner. If the applying organisation is the Landowner, you are required to attach your Certificate of Title for the land.

In relation to the land being developed through this project: *

- ☐ The applying organisation IS the Landowner
- ☐ The applying organisation IS NOT the Landowner

The applying organisation is the Landowner

You have stated that the applying organisation is the Landowner. Please attach your Certificate of Title for the land.

Certificate of Title: *

Attach a file:

Failure to provide this evidence may result in your application being deemed ineligible.

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What is the land title reference for the site? ie CT# *

Check the CT number for the land being developed here: <https://sappa.plan.sa.gov.au/> . If the land has multiple CT numbers provide all of them.

The applying organisation is not the Landowner

You have stated that the applying organisation is not the Landowner. Please get your landowner to complete the following form, once they have completed it, you will need to upload it below.

[Landowner Consent Form Download](#)

Landowner Consent Form approving your proposed facility development *

Attach a file:

Failure to provide this evidence may result in your application being deemed ineligible.

What is the end date of your current lease/licence? *

Must be a date.

Socio-Economic Disadvantage

For the purposes of this program, a community experiencing socio-economic disadvantage is identified as having a Socio-Economic Indexes for Areas (SEIFA) **score of 4** or lower as determined in the Australian Bureau of Statistics **Suburbs and Localities, Indexes, SEIFA 2021**.

[Socio-Economic Indexes for Areas \(SEIFA\), Australia, 2021 | Australian Bureau of Statistics \(abs.gov.au\)](#)

Interactive Map: [Socio-Economic Indexes for Areas \(SEIFA\), Australia 2021 \(arccgis.com\)](#)

Applications located in a Low SEIFA area are required to contribute a minimum of 25% in funding toward the project.

Is your project located in a Low SEIFA area? *

☐ Yes ☐ No

Project Costs and Funding Sources

* indicates a required field

Applications requesting over \$500,000 must contribute a minimum of 66% in funding towards the project. Therefore, to request the maximum of \$750,000, the total project cost must be equivalent to or greater than \$2.25 million.

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All other infrastructure stream applications must contribute a minimum of 50% in funding towards the project unless the facility is physically located within a geographical catchment area that is experiencing socio-economic disadvantage.

Project Costs

Provide an itemised breakdown of the major costs associated with your project. Each of the costs below will need to be evidenced with quotes in the following question.

Costs should be only listed if they are eligible and in direct relation to the project in which you are applying for.

- Do not include cents – round up to the next dollar.
- If your organisation is GST registered costs are to be GST exclusive.
- If your organisation is not GST registered cost are to be GST inclusive.

Project Costs (Description) \$ (whole numbers) Itemised breakdown of the major costs.

Evidence of Project Costs (Quotes)

Must be no more than 20 words.	Must be a whole dollar amount (no cents).	
	\$0	
	\$0	
	\$0	
	\$0	

Total Cost of the Proposed Project

Total Project Cost

\$

This number/amount is calculated.

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

Confirmation that none of the funding sources that will be listed below will include funds derived from an insurance payout. *

☐ Confirm that no funding source will include funds from an insurance payout

Confirmation that none of the co-contribution funding sources listed below will include funds derived from the SA Football Facilities Fund (SANFL) or State Government funding, *

☐ Confirm that no co-contribution funding source will include funds from SA Football Facilities Fund (SANFL) or State Government funding

Project Funding & Co-Contribution

Please provide evidence of each of the funding sources below. Evidence could be a formal letter/email with organisational letterhead.

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Co-contributions are limited to confirmed cash contributions and in-kind materials and labour.

Evidence relating to in-kind support should be as detailed as possible. Where non-professional labour is quoted use \$25 per hour, and for professional in-kind support use as a rough guide \$60 per hour.

Details Funding Sources (do not include IPP)	Source of Funding	\$ (whole numbers)	Evidence of Project Funding
Must be no more than 10 words.			
		\$0	
		\$0	
		\$0	
		\$0	

Funding Sources Total (not including IPP)

\$

This number/amount is calculated.

Minimum co-contribution check

The check below needs to read at least 50%. Unless they are one of the following.

- Applications requesting over \$500,000 must contribute a minimum of 66% towards the project.
- Applications for low SEIFA projects (eligibility outlined in IPP Guidelines) in which a minimum of 25% is accepted.

Applicants co-contributions as a percentage:

This number/amount is calculated.

Amount Requested from the Office for Recreation, Sport and Racing

Please take the time to consider your answer - this figure is final. Successful projects are ineligible to receive further funding through the Office for Recreation, Sport and Racing through other grant programs once it has been funded.

Total Amount Requested *

\$0

Must be a dollar amount and no more than 750000.

Total Project Cost	Funding Sources	IPP Requested	Project Cost and Funding Reconciliation
Total Project Cost	Funding Sources	IPP Requested	Cost - Funding

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\$	\$	\$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.
Itemised breakdown of the major costs associated with your project.	Other sources of funding for this project (non IPP).	The amount your organisation is seeking from the IPP.	This number should equal zero. If it does not, please review your organisation's IPP Requested Amount, or the Project Costs and Funding Tables above.

How will the replacement of the facility be funded at the end of its useful life? *

Word count:
Must be no more than 150 words.
Please consider that Government funding is not always available nor guaranteed.

Project Need

* indicates a required field

Current Situation

Successful applications will address an identified need, gap or deficiency in the availability of fit for purpose female sporting facilities for the community.

Describe the current state of the facility and the issues that mean new or upgraded infrastructure is required. What is the need and how will you address it? *

Word count:
Must be no more than 150 words.
Tell us why your initiative is needed, and why you believe the activities you propose will produce the outcomes you seek. Provide statistics/evidence (where available) of both the need and the link between the work you will do and the outcomes you seek. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

For the following file uploads please ensure files are named. For those wishing to upload multiple files, collate those documents into one file where possible.

Attach photos of your current facility to justify the need for your project.

Attach a file:

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Professional evidence relating to the current state of the facility (e.g. audit findings, structural reports etc.)

Attach a file:

Beneficiaries

A requirement of the IPP is that eligible projects must be for the benefit of female users. The project may also potentially provide a benefit to other users.

Describe the benefits of the project for all user groups of the facility.

Beneficiaries Groups/Users	Describe Benefits:
Must be no more than 10 words.	Must be no more than 50 words.

Community Support

[Project Support Form Download](#)

Support can be provided by any organisation or individual.

Effort and priority should be given to approaching any co-located clubs, groups that share the precinct, and anyone who is listed to benefit from the project.

Please note that this is a template only, those wishing to provide support do not have to use this form if they do not want to. However, it is advised that their support letter include the details within the template at a minimum.

What evidence do you have that this project/program has community support?

Word count:

Must be no more than 100 words.

Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Project Forms

Attach a file:

Participation & Utilisation

* indicates a required field

Supported activities and targeted users

Indicate the activities of the primary users of the facilities *

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- | | | | |
|-------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Fencing | <input type="checkbox"/> Motor Sport | <input type="checkbox"/> Squash / Racketball |
| <input type="checkbox"/> Athletics / Little Athletics | <input type="checkbox"/> Flying Disc / Ultimate Frisbee | <input type="checkbox"/> Motorcycling | <input type="checkbox"/> Surf Life Saving |
| <input type="checkbox"/> Badminton | <input type="checkbox"/> Football (Australian Rules) | <input type="checkbox"/> Netball | <input type="checkbox"/> Surfing |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Football (Gaelic) | <input type="checkbox"/> Orienteering | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Football (Gridiron) | <input type="checkbox"/> Outdoor Recreation / Camping | <input type="checkbox"/> Table Tennis |
| <input type="checkbox"/> Billiards / Snooker / Darts | <input type="checkbox"/> Football (Rugby League / Oztag) | <input type="checkbox"/> Racing - Greyhound | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> BMX / Mountain Biking | <input type="checkbox"/> Football (Rugby Union) | <input type="checkbox"/> Racing - Harness | <input type="checkbox"/> Tenpin Bowling |
| <input type="checkbox"/> Bocce / Boccia / Petanque | <input type="checkbox"/> Football (Soccer / Futsal) | <input type="checkbox"/> Racing - Thoroughbred | <input type="checkbox"/> Triathlon / Biathlon |
| <input type="checkbox"/> Bowls | <input type="checkbox"/> Football (Touch) | <input type="checkbox"/> Recreation (Indoor / Fitness) | <input type="checkbox"/> Underwater Sports |
| <input type="checkbox"/> Boxing | <input type="checkbox"/> Gliding | <input type="checkbox"/> Recreation (Motor) | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Calisthenics | <input type="checkbox"/> Golf | <input type="checkbox"/> Recreation (Outdoor / Fitness / Adventure / Camping / Horse) | <input type="checkbox"/> Water Polo |
| <input type="checkbox"/> Canoeing / Kayaking | <input type="checkbox"/> Gymnastics / Kindergym / Cheerleading | <input type="checkbox"/> Recreation (Water Activities) | <input type="checkbox"/> Water Skiing |
| <input type="checkbox"/> Cricket | <input type="checkbox"/> Handball / Goalball | <input type="checkbox"/> Roller Sport | <input type="checkbox"/> Weightlifting / Powerlifting |
| <input type="checkbox"/> Croquet | <input type="checkbox"/> Hockey | <input type="checkbox"/> Rowing | <input type="checkbox"/> Wheelchair Sports |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Ice Hockey | <input type="checkbox"/> Royal Life Saving | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Dance (Non Sport) | <input type="checkbox"/> Ice Skating | <input type="checkbox"/> Sailing / Yachting | <input type="checkbox"/> Other |
| <input type="checkbox"/> Dance (Sport) | <input type="checkbox"/> Korfbal | <input type="checkbox"/> Shooting / Rifle / Pistol | <input type="checkbox"/> No Specific Organisational Activity (Council) |
| <input type="checkbox"/> Diving | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Softball | <input type="checkbox"/> No Specific Organisational Activity (Education) |
| <input type="checkbox"/> Dragon Boat | <input type="checkbox"/> Martial Arts | <input type="checkbox"/> Sport Climbing | <input type="checkbox"/> No Specific Organisational Activity (Health) |
| <input type="checkbox"/> Equestrian | | | |

No more than 6 choices may be selected.

Please select all activities that the list facilities/amento this application.

What is the target gender(s) for this project? *

- ☐ Female

Please select all relevant genders.

What age groups is your project targeted at? *

- ☐ [0-4] ☐ [5-12] ☐ [13-17] ☐ [18-25] ☐ [26-54] ☐ [55+]

Please select all relevant age groups.

Primary Active Participants

Number of weekly primary active participants who will use the proposed facility

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Use this table to indicate on a weekly basis who will be using the proposed facility. Where possible refer to registration systems to provide accurate figures.

Each row should relate to one of the user groups mentioned previously in your application.

Do not include away teams, annual events, spectators.

User groups/ activities indicated above

	Junior Females	Senior Females	Junior Males	Senior Males
	Must be a number.	Must be a number.	Must be a number.	Must be a number.

	Must be a number.	Must be a number.	Must be a number.	Must be a number.

Totals

These fields are automatically populated using the information entered above.

Females

Total Females

This number/amount is calculated.

Males

Total Males

This number/amount is calculated.

Total

Total Active Participants Using Facility

This number/amount is calculated.

Participation outcomes

Describe the participation outcomes of this project.

Will the project:

- increase female participation or involvement in sports and physical activities?
- maintain current female participation or involvement in sports and physical activities?
- improve quality of participation for female users?

Is there a plan to ensure the anticipated participation changes are achieved post completion of the project?

*

Word count:

Must be no more than 200 words.

Programming

Describe how the project will lead to additional and/or priority programming opportunities for female participants and/or improved inclusiveness.

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*

Word count:
Must be no more than 150 words.

Equality of opportunity

Describe how the project promotes and supports equality of opportunity.

*

Word count:
Must be no more than 150 words.

Quality Infrastructure

* indicates a required field

Current Facility Plan - attach a collated file that shows the CURRENT (prior to project) facility layout:

Attach a file:

Multiple files can be uploaded. Please take time to name the file correctly (description of content).
Upload Section - must be PNG, JPG or GIF Format

Annotation of the following plans is advised, to provide further details directly on the plan.

Example 1: for a changerooms/clubroom project, an aerial map of your site showing current precinct set up as well as internal floor plans.

Example 2: for a lighting project, lux chart showing current light distribution chart and lighting source location.

Example 3: for surface development, an aerial map indicating current layout including line marking.

Precinct Map - attach an aerial image that shows the current layout of your precinct.

Attach a file:

Proposed Facility Plans - attach a collated file that show the PROPOSED (upon completion) facility layout.

Attach a file:

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Attach the relevant plans for the project, these attachments must clearly show what is being proposed. This upload should contain the proposed plans for the facility. E.g. Building Plans or Architectural Designs. Those not applying for a building should consider attaching a satellite image of their site which clearly indicates where and what is proposed.

Proposed Facility Specifications - attach a collated file that show the PROPOSED design specifications.

Attach a file:

Development Approval

Do you have Development Approval for your project? *

- | | |
|----------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="radio"/> Yes - received (attach below) | <input type="radio"/> No - not required (attach email of verification below) |
| <input type="radio"/> No - lodged and awaiting decision (attach lodgement below) | <input type="radio"/> Other: |
| <input type="radio"/> No - required, but not yet lodged | <div></div> |

Evidence of Development Approval

Attach a file:

Design Standards

Evidence how the proposed infrastructure design meets the relevant standards of the sport/s undertaken at the facility.

*

Word count:

Must be no more than 100 words.

Design Principles

How do the proposed project plans address risk management, universal design and environmentally sustainable design principles?

*

Word count:

Must be no more than 100 words.

Strategic Justification

* indicates a required field

How will your initiative help the Office for Recreation, Sport and Racing achieve our goals? *

Word count:
Must be between 50 and 100 words.
Tell us how your project Aligns with [ORSR’s strategic plan](#).

Strategic Documents

Upload documentation which evidences the planning undertaken that led to the project conception (i.e. strategic plan, facility feasibility study, master plan, business case, or like document).

Name of Document - Include in title coverage years and/or year of publication	File Upload	If your documents are accessible online provide link:
Include in title coverage years and/or year of publication	for larger file that are online use 'Website Link to Doc'	Optional Must be a URL.

Gender equality and participation strategy

Where one exists, please upload a copy of the gender equality plan or participation strategy that supports the proposed infrastructure development.

Attach a file:

State Sporting Organisation - Project Support

[Project Support Form Download](#)

Support should be provided by State Sporting or Recreation Organisations.
Ensure to save the file under the name of the organisation that is providing their support. Do not use acronyms.
Please note that this is a template only. Those wishing to provide support do not have to use this form if they do not want to. However, it is advised that their support letter include the details within the template at a minimum.

Project Support Form
Attach a file:

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I give permission for any of the information provided within this application to be made available to the State Sporting Organisations who have provided a letter of support above. *

☐ Yes ☐ No

Local Council - Project Support

[Local Council Project Support Form Download](#)

Applicants should contact their Local Council as soon as practicable in order to give sufficient time to discuss their project.

Local Council Support Form Upload

Attach a file:

I give permission for any of the information provided within this application to be made available to the local Councils who have provided a letter of support above. *

☐ Yes ☐ No

Consultation

All facility development should at a minimum be discussed with the membership or community in which it affects. In the following questions please discuss consultation undertaken.

E.g. A project that addresses the availability of female changerooms should be discussed with female members to ensure it meets their needs.

Evidence of consultation

Attach a file:

E.g. Survey results, Forum minutes, Public consultation results

Project Delivery and Maintenance

*** indicates a required field**

Project Delivery

It is anticipated that successful applicants will receive funding in April 2025.

Should a successful grantee be unable to meet the 12 month construction commencement timeframe, funding may be recalled.

Will construction associated with the project commence within 12 months of receiving funding (grant payment likely to be released in May 2025)?

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☐ Yes - construction will begin before May 2026 ☐ No -construction will not begin before May 2026 ☐ Unsure

Estimated Project Start Date *

Must be a date.

When do you estimate the project will break ground?

Estimated Project End Date *

Must be a date.

When do you estimate the project will be completed?

Project Delivery attachments (e.g. Project management plan, Gantt chart, comprehensive delivery plan)

Attach a file:

Steps Prior to Construction Commencement

Should your application be successful, list the remaining steps that must be undertaken prior to commencement of construction. (e.g. community consultation, tender process, final designs):

Steps Prior to Construction Commencement

Estimated Date of Completion

Must be no more than 20 words.	Must be a date.

Summary of key project timelines/milestones

Based on the plans attached in the question above, list all the major steps from start until completion. E.g. Development Approval received, Ground works begin, Foundation poured etc.

Major Steps - Approach this question as a timeline. Listing all the major steps from start until completion.

Estimated Start Date

Estimated End Date

	Must be a date.	Must be a date.

The Power of Her - Infrastructure Stream 2024-25

Form Preview

Management of Project Delivery

Who will be managing the delivery of the project? *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Position/Title *

Phone Number *

Must be an Australian phone number.

Website

Must be a URL.

List any relevant project management history of the person/organisation that is delivering the project. *

Word count:

Must be no more than 100 words.

Maintenance

What are the expected annual maintenance cost for the facility? *

\$

Must be a dollar amount.

Maintenance costs percentage of total project cost

This number/amount is calculated.

Managing the maintenance of the facility upon completion

Who will be managing the maintenance of the project? *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Form Preview

Please discuss how the proposed facility will be maintained. Feel free to use the prompts below to guide your discussion: *

Do you have a separate/clearly defined fund dedicated to maintenance?

How is this fund financed?

Is there an asset management plan for this site/reserve? (attach below if there is)

Word count:

Must be no more than 500 words.

If there is an asset management plan for this facility/site/reserve, please attach:

Attach a file:

Declaration and Submission

* indicates a required field

Declaration Instructions

1. The declaration below must be read and acknowledged by two authorised representatives of your organisation.
2. At least one representative must be a member of the Board / Management Committee or Senior Management in case of larger organisations.

Declaration by authorised persons

I make the following declaration:

1. I am duly authorised by the organisation to prepare and submit this application.
2. This organisation is eligible to apply for funding in accordance with the eligibility criteria in the Funding Guidelines.
3. The responses in this application and all supporting documents provided are to the best of my knowledge true and correct.
4. I understand that the Office for Recreation, Sport and Racing may disclose the information provided in this application to other Government agencies, Local Government, reviewers and staff assisting with the administration or promotion of State Government Grant Schemes and/or in the event of a request pursuant to the *Freedom of Information Act 1991*.
5. I understand that information in relation to this project will be made public in the event that the application for funding is successful and in other circumstances as outlined in the program guidelines.
6. Where required, our project will comply with all the relevant codes, standards and applicable legislation including, but not limited to, the *Disability Discrimination Act 1992* and the *Children and Young People (Safety) Act 2017*.

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Form Preview

First Authorised Representative *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position - Applicant Admin Contact *

eg committee member, treasurer, secretary

Primary Phone Number *

Must be an Australian phone number.

Other Phone Number

Must be an Australian phone number.

Email *

Must be an email address.

Date *

Must be a date and no earlier than 4/9/2024.

Second Authorised Representative - Head of Organisation *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position - Head of Organisation *

eg. CEO, President, General Manager. If successful in receiving funding, the grant agreement will be issued to the Head of Organisation.

Primary Phone Number *

Must be an Australian phone number.

Other Phone Number

Must be an Australian phone number.

Email *

Must be an email address.

Date *

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Form Preview

Must be a date and no earlier than 4/9/2024.

Feedback

If you have the time, we would appreciate some feedback.

How did you find out about this grant application?

- ☐ Council
- ☐ Facebook post
- ☐ Other Social Media
- ☐ Electorate Office
- ☐ Grant Finder Website (e.g. GrantAssist)
- ☐ Other
- ☐ Email from other organisation
- ☐ Newspaper
- select any that apply

Have you previously applied for our grants?

- ☐ Yes
- ☐ No

Did you contact the Grants Administrators for assistance?

- ☐ Yes
- ☐ No

Did you email or telephone the grant administrators for assistance

How satisfied were you with the assistance you received when contacting the Grant Administrators?

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- 1 very dissatisfied to 5 very satisfied

How many minutes did you take to complete this application?

Must be a number.

An estimate number of minutes.

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.