### Sponsorship Program 2024/25

\* indicates a required field

### **Purpose**

To promote the Mornington Peninsula Shire and attract additional investment in the environmental, economic, social, health and wellbeing and cultural vitality of the Shire.

### Important Information

Before completing this application, applicants are required to read the <u>Sponsorship Program</u> Guidelines 2024/25

Sponsorship funds are aimed at public promotion of the Shire, its agencies or programs as opposed to material contribution towards the staging of an event.

The scope of the program does not include the receiving of sponsorship requests for infrastructure or naming rights on infrastructure.

### **Closing Date**

30 April 2025 unless funds are exhausted earlier

#### **Eligibility**

For eligibility please refer to Sponsorship Program Guidelines 2024/25

### **Funding**

Eligible applicants may seek up to:

• Bronze sponsorship: up to \$10,000

Silver sponsorship: up to \$20,000Gold sponsorship: up to \$35,000

• Platinum sponsorship: up to \$50,000

### **Cultural Protocols**

For projects that include an Acknowledgement of Country or Welcome to Country, please refer to the Shire's guide to <u>Cultural Protocols</u>

### **Prior Shire Funding**

All previous financial year grant funding must be acquitted prior to applying for another grant.

Has the organisation previously received Shire grant or sponsorship funding? \*

O Yes i.e. grant, sponsorship, su	○ <b>No</b> bsidy	○ Unsure
Has the Acquittal rep  Yes  No  Acquittal report has  Unsure If you are unsure, please of	not reached the due da	ding been submitted? * ate
You have indicated prior		been acquitted.
	have acquitted and/or with all funding previou	have an approved acquittal extension to ssly awarded.
Please do not proceed v	vith this application unt	il you have acquitted previous funding.
If you are unsure, pleas	e email the <u>Grants tear</u>	<u>n</u>
Details of Applica	ant	
* indicates a required fi	eld	
<b>Applicant Organisation</b> Organisation Name	on *	
Community Group, busine	ss, organisation name	
Applicant Primary Ad Address	ldress *	
Address Line 1, Suburb/To	wn, and Postcode are req	uired.
Applicant Website		
Must be a URL.		
Contact Details		
Contact Person * First Name	Last Name	

This is the primary conta	ct for correspondence		
Position in Organisa	ition *		
i.e President, owner, com	nmittee member		
Contact Phone Num	ber *		
Must be an Australian ph	one number.		
Contact Email Addre	ess *		
Must be an email addres All emailed corresponder	s. nce will be sent to this ad	dress	
Applicant - Requi	red Information		
		under State/Territory le	egislation (commonly
<ul> <li>Not for-profit propried</li> <li>Corporations Act 2001</li> </ul>		ublic companies, incorp	orated under the
<ul><li>Organisations esta legislation (for exampl</li></ul>	blished through a spec	cific piece of Commonw plent institutions and ch price)	
<ul><li>State Government</li><li>Public Benevolent</li></ul>	Entity	•	
<ul> <li>School or kinderga</li> </ul>	rten		
<ul><li>Commercial (for pr</li><li>Registered Sole Trans</li></ul>			
•	340.		
Applicant ABN			
The ABN provided will	he used to look up the	following information.	Click Lookup above to
THE ADIA PROVIDED WIII	be ased to look up the	Tonowing information.	CHEK LOOKUP UDOVE LO

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.						
<b>Applicant Prima</b> Account Name	ry Bank Accoun	t *				
BSB Number	Account Number					
Must be a valid Aus	tralian bank accoun	t format.				
Unincorporated or Mornington Penins				nt with an i	ncorporate	ed
If this application organisation.	is successful, pay	ment of grant t	funding will b	e made to	the auspic	re
Do you require a  ○ Yes	an Auspice Agre		<b>is applicatio</b> No	on? *		
Uploads						
Upload - Statement by a S you do not have an ABN) Attach a file:		I - 12 month financial Ilance Sheet * a file:		l <b>pload - Insuranc</b> o ttach a file:	e Certificate of	Currency *
Applicants without a submit a <u>Statement</u> form						

If applicable, where an application involves working with children or young people, a copy of the organisation's Child Safety Policy must be attached to the application.

If there is no formal Child Safety Policy there must be an outline of how it is intended to comply with the Child Safety and Working with Children legislation.

<b>Upload - Child Safety Policy/Plan</b> Attach a file:				

### **Auspice Organisation**

\* indicates a required field

Funding is paid directly to the Auspice organisation, who are responsible for the following obligations:

- Receipt, bank, and administer all monies related to the grant
- Monitor the project and ensure timely completion
- Complete the financial acquittal and ensure funding is acquitted on time
- Ensure that the group has public liability insurance where appropriate

• Elisure tila	t the group has public	. IIability IIISul	апсе мпеге аррг	орпасе.
Auspice Organ				
Organisation Na	me			
<b>Auspice Organ</b> Address	isation Street Addı	·ess *		
Address Line 1, Su	uburb/Town, and Postco	de are required		
Auspice Organ	isation Email *			
Must be an email	address.			
Auspice Organ	visation ARN *			
Auspice Organ	IISACIOII ADN			
	ed will be used to look nave entered the ABN		ing information.	Click Lookup above to
	the Australian Business			]
ABN				
Entity name				
ABN status				
Entity type				
Goods & Services	Tax (GST)			
DGR Endorsed				
ATO Charity Type	<u>Mor</u>	e information		
ACNC Registratio	n			
Tax Concessions				
Main business loc	cation			
Must be an ABN.				•
Auspice Organ	isation Bank Accou	nt *		
Account Name				
BSB Number	Account Number			
Must be a valid A	ustralian bank account f	ormat		
	where funds will be de			

If sucessful, this is where funds will be deposited.

Upload - Signed Auspice Agreement * Attach a file:				
Auspice Agreement available on Shire website				
Activity Details				
* indicates a required field				
Proposal Title *				
Must be no more than 12 words. Please provide a succinct title for your application.				
Description of Proposal *				
Word count: Must be no more than 150 words. Provide a clear and succinct description of what you are doing.				
Where will your proposed activity take place? *				
Street address and/or venue name				
Activity Start Date *				
Must be a date.				
Assessment Criteria				
Applicants must achieve a minimum of 75% of the total possible score.  The following criteria will be assessed on a scale of 1-5:  • 5 = meeting each criterion at a high level  • 1 = not meeting the criterion.				
1) CRITERION: Sponsorship Priorities				
Which Sponsorship priority does your proposal target? * □ Enhance the reputation and visitation to the Mornington Peninsula Shire				

$\hfill\square$ Boost the prosperity of the Mornington Peninsula through increased economic activity and jobs
☐ Build a flourishing and diverse Mornington Peninsula creative ecosystem
How will your proposal support the priorities above? *
Word count: Must be no more than 50 words. Write short a short description how your proposal will support the priorities.
2) CRITERION: Partnerships - Marketing and Promotion
How do you intend to promote Mornington Peninsula Shire as a sponsor of your proposal/initiative *
Word count: Must be no more than 100 words.
List any other partners / sponsors / media you have either secured, approached or intend to approach to support your proposal/initiative *
Word count: Must be no more than 50 words.
Marketing / Project Plan
Applications must include a detailed marketing/project plan including the media exposure for Council and details of the promotional opportunities at the Local, State, National and International level.
Upload - Detailed Marketing/Project Plan * Attach a file:
3) CRITERION: Environmental, Economic and Social Benefits
Consider, how does the activity support one or more of these benefits?
1.Acceleration of the protection and resilience of Mornington Peninsula's natural environment and/or renewal energies

Who have you engaged with and/or are you partnering with (community groups) for your proposal/initiative? \*

4.Showcases the Mornington Peninsula as a destination for performing and visual arts

2.National competition/tournaments

Peninsula

3.Industry and trade exhibitions to facilitate major business investment in the Mornington

Word count: Must be no more than 50 words.
Upload - evidence of engagement/partnership Attach a file:
i.e. support letter, correspondence with partner organisation
<ul> <li>Who will benefit from your proposal/initiative? *</li> <li>Individual or unidentified level of access</li> <li>Limited to exclusive group membership</li> <li>Broad community access within limited geographic area</li> <li>Broad community access throughout Mornington Peninsula Shire</li> </ul>
4) CRITERION: Feasibility of the Project
Will the project be carried out on public or private land/facility? *  □ Public land - community use □ Public land - limited community access □ Privately owned land □ Publicly used private land □ Unsure
Have you obtained land owner permission? *  O Yes
<ul> <li>No</li> <li>Pending</li> <li>Not Applicable</li> <li>i.e Parks Victoria, VicRoads, State Government etc. Preliminary approval is required as a minimum for this application. If successful, funding will not be provided until evidence of full approval is granted.</li> <li>For Shire owned community facilities, please email the Property department for landowner permission</li> </ul>
5) CRITERION: Capacity of the Applicant
Please provide evidence that your organisation has the capacity and relevant skills and experience to successfully deliver your proposal/initiative.
Who will deliver the proposal/initiative? *  □ Staff □ Contractors □ Volunteers
Have you discussed your project with a Shire Officer? If so, who? *

### Proposed Budget

\* indicates a required field

5) CRITERION: Budget

Funding is available for successful applications for up to 3 financial years commencing in 2024/25.

How many years of funding are you requesting \*

1 year only - 2024/2025 FY 2 years - 2024/2025 and 2025/2026 FY

O 3 years - 2024/2025, 2025/2026 and 2026/2027 FY

Which level of Sponsorship are you applying for (per year)? \*

- Bronze: up to \$10,000 Silver: up to \$20,000
- Gold: up to \$35,000 Platinum: up to \$50,000

### Budget - Activity/Project Co-contribution

Please show all sources of cash income (excluding this funding request) in the table below that contributes to the activity. Include the name of other funding sources that you have applied for, whether it has been confirmed or not.

- Do not include the amount sought from the Shire (see separate question below)
- **Do not** add in-kind volunteer hours here (see separate table below).
- Do not use commas or \$ signs in figures. You may add additional rows if needed.

Co-contribution Source	Co-contribution Amount \$	Co-contribution Status
	\$	
	\$	
	\$	

### Budget - Activity/Project Expenditure

Please describe the main items of expenditure for the activity so that it is clearly understood what the income will be used for.

- Nominate a funding source for each item.
- Refer to the guidelines to see what is ineligible to be funded.
- Do not add in-kind volunteer hours here (see separate table below).
- Do not use commas or \$ signs in figures. You may add additional rows if needed.

Expenditure Items Description	Expenditure Amount	Expenditure funding source
	\$	
	\$	
_	\$	

### Total Project Income

### Total income and expenditure should be the same. All amounts should be GST exclusive.

Amount Requested (per year)	Co-contribution	То	tal Income	Amount	
\$	\$	\$			
Must be a dollar amount. Refer to your response ab	This number/am pove calculated.	ca TI gi	This number/amount is calculated. This figure is the total of grant funding request and cocontribution.		
Total Project Expe	enditure & Quotes				
Total Expenditure Amount		Please attach quotes for grant (must be to the val		e items to be funded by the inding request)	
This number/amount is ca	alculated.				
		Online pricing is ac	ceptable	:	
Volunteer (in-kind	l) Contribution				
Volunteer hours are cal	lculated at \$46.92 per	hour per voluntee	r.		
Number of Volunteers	Estimate hours per volunteer	Total volunteer hours		tal in-kind volunteer ntribution	
			\$	ntribution	
Must be a number.	Must be a number.	This number/amou calculated.	- 11	nis number/amount is alculated.	
Declaration and	Acceptance				
* indicates a required f	ield				
I declare that the information and attachments in this application are, to the best of my knowledge, accurate and complete. *  O I agree and declare the above to be true and correct					
I/We understand that if this application is successful, I/we will be required to sign a MPS Funding Agreement prior to funds being released *  O I understand and agree					
I approve for Shire Officers to talk to other funding bodies / organisations for the purposes of seeking funding to support the activity. * $\bigcirc$ Yes $\bigcirc$ No					

Local Government Reporting

A list of grants made by the Council in the previous 12 months, including the names of applicants who, or bodies which, have received a grant and the amount of each grant may be published in Council's Annual Report.

### Privacy

The collection and handling of personal information is conducted in accordance with The Shire's Privacy Policy which is displayed on Council's website and available at Council's customer service centres. Please refer to the Privacy Policy for further information about your rights and Council's obligations.

https://www.mornpen.vic.gov.au/System-pages/Privacy-Statement