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| Application Form**2025-26 Environmental** **Management Fund (EMF) Grants** |
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| File No: FIN/153 |

# Closing DateApplications due by 5pm on Monday 5 May 2025

# Organisation Details

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| Applicant’s contact details |  |
| Contact person |  |
| Name of organisation (if applicable) |  |
| Contact number/s |  |
| Contact email |  |
| Address |  |
| Postal address*If different to above address.* |  |

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| Applicant’s organisation details (if applicable) | Please tick |
| Is the applicant organisation a business or incorporated not-for-profit organisation? |  [ ] Yes [ ] No*If yes, please attach proof* |
| Are you registered for GST? | [ ] Yes | [ ] No |
| Do you have Public Liability Insurance |  [ ] Yes [ ] No*If yes, please attach a copy of the Certificate of Currency* |

# Project Summary

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| Project |  |
| Project name |  |
| Project date/s |  |
| Location |  |

# Funding request

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| Funding request details |  |
| Amount being requested (ex. GST) |  |
| Funding period | [ ] 1 year [ ] 2 year [ ]  3 years*Please tick*  |
| Have you applied for funding from the Shire previously? |  [ ] Yes [ ] No*If yes, please attach information.* |
| Is the Shire already providing the applicant organisation with financial assistance in this financial year? | [ ] Yes [ ] No*If yes, please attach information.* |
| Have you applied for, or are you intending to apply for, other funding sources for this project? |  [ ] Yes [ ] No*If yes, please provide information in Budget template* |
| What will the funds be used for? | *Please attach information* |

# Assessment criteria

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| Assessment Criteria  |
| *Describe how the project will address the following criteria:*  |
| A: Environmental sustainability outcomes – 30% | * Longevity of outcomes.
* Consistency with the EMF themes.
* Importance of the proposed works i.e. project addresses a known issue.
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| B: Methodology – 30% | * Proposed methodology is appropriate and uses best practice.
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| C: Timeframe and expenditure – 20% | * Project timeframe is realistic.
* Project demonstrates value for money.
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| D: Broad benefit and community partnerships – 20% | * Project demonstrates broad benefits
* Project demonstrates strong community partnership in delivering proposed project (in-kind contributions, on-going community support etc.)
* Collaboration with Aboriginal stakeholders.
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**Please complete this** **application form and the attached** **budget/workplan.**

Expand sections as required but try to keep responses succinct. Please describe how your project meets the assessment criteria in your responses. Funding will be provided to applicants that best meet the above assessment criteria.

# Project Details

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| 6.1 Project summary |
|  Please provide a summary (250 words max) of your proposed project. |
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| 6.2 Project details |
| What is the problem? Why is this a problem? Provide a short response as to what the problem is and why it is an issue.  |
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| What will you do about the problem? How will you do it? Provide a detailed response as to how you will address the problem. Provide specific methodology and link activities to the workplan over leaf.  |
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| Why is this the best approach to address the issue?  |
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| Where will you do it? Provide a description of where the project will be delivered. If the project is largely focussed on on-ground works, provide a map if possible. Do you have appropriate permissions to undertake the works? |
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| Do you propose to monitor the success of the project? If so, how? |
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| How will this project provide long term environmental sustainability benefits? |
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| 6.3 Budget and work plan  |
| Complete the work plan/budget template. |

Please attach budget and work plan information using our ***EMF Grants Budget and Workplan Template.*** This is available on the EMF Grants section of our website [www.amrshire.wa.gov.au/grants](http://www.amrshire.wa.gov.au/grants)

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| 6.4 Community involvement |
| How does your project involve the community? Please detail any partnerships or community involvement? |
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| Will your project increase the capacity of the community? |
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| Have you collaborated with the Aboriginal Indigenous community about your project? Are any approvals under the Aboriginal Heritage Act required? |
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# Applicant’s Financial Details

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| Applicant Banking Details |  |
| ABN: |  |
| Name of account: |  |
| BSB: |  |
| Account number: |  |

# Authorisation

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| Authorisation Details |  |
| Name of authorising applicant |  |
| Position of authorising applicant |  |
| I authorise this application for an EMF Grant to be considered for approval. If approved, I acknowledge:* the project must be acquitted within one month of completion;
* I may consent for the Shire to use project images and quotes for promotional purposes, including such as news reports, articles, media releases, social media posts and the Shire of Augusta Margaret River’s website.
 |
| Date |  |



**Please ensure that you have completed/attached the following before submitting the application.** *Please tick off each item when it has been completed or attached.*

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| □ | I have read the EMF Grant Program Guidelines.  |
| □ | My proposed project meets **EMF theme/s.**  |
| □ | I have completed **every** question in the **Application Form.** |
| □ | My answers address the **Assessment Criteria** |
| □ | I have provided **attachments** in support of my application where relevant.  □ EMF Grants Work Plan / Budget inc. any fees and charges □ Details of in-kind contributions or other sources of funding □ Map (if appropriate) □ Other *(specify)*  |

# Application Assistance

Applicants are encouraged to contact the Shire to discuss their application before submitting.

For assistance contact:

Jared Drummond

Senior Environmental Landcare Officer

Phone: (08) 9780 5658

Email: jdrummond@amrshire.wa.gov.au

# Application Submission Options

Completed applications must be submitted to the Shire by **5pm on 5 May 2025**. Electronic copies are preferred, although hard copy applications will be accepted.

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| Emailil:  | amrshire@amrshire.wa.gov.au |
| Post | Chief Executive OfficerShire of Augusta Margaret RiverPO Box 61Margaret River WA 6285 |