

Minor Donations

Form Preview

Minor Donations

* indicates a required field

Applicants: please note

Before completing this application form, please read the program guidelines to ensure you're eligible: [Minor Donations | City of Wollongong](#)

If you have any questions in regard to the eligibility criteria, please contact events@wollongong.nsw.gov.au or 4227 7111.

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

Application Number

This field is read only.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- you have read and understood the program guidelines
- you are able to demonstrate alignment between your activity and the aims of this program
- you are a resident of the Wollongong local government area

You must confirm that all statements above are true and correct. *

Yes

Contact Details

* indicates a required field

Applicant Details

Applicant *

Individual Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Make sure you provide the same name that is listed in official documentation.

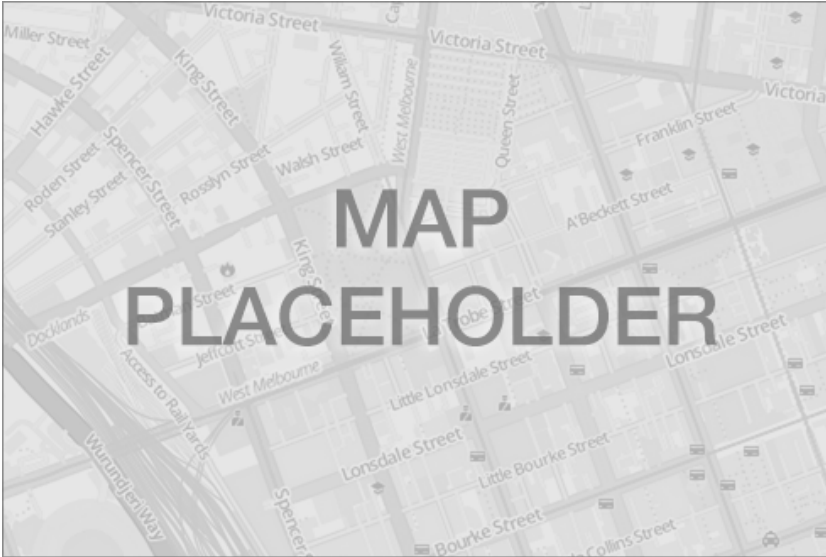
Application position (if applicable)

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Applicant/ organisation primary address (Note: you must live in the Wollongong LGA to be eligible for a minor donation)

Address



Applicant postal address

Address

Applicant primary phone number *

Must be an Australian phone number.

Applicant email address *

Must be an email address.

Activity / project details

* indicates a required field

Name of activity / project you are seeking funding for. (Note: minor donations funding cannot be used to fund the organisation of events) *

Word count:

Must be no more than 25 words.

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What date will the activity take place *

Location of activity / project *

Address

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

Please provide a brief description of your activity / 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).

Which of the following best describes your activity / project? *

- Local representation in a recognised national sporting or other event
- Local representation in an international sporting event
- Not-for-profit organisation providing a recognised, necessary service
- Charitable organisation providing significant support to groups or individuals in the Wollongong Local Government Area
- Other

Financial Assistance - How can Council help?

Why are you seeking support from Wollongong City Council? *

What amount of cash support are you seeking from Wollongong City Council? *

- Individual selection for a national or international event - \$250
- Multiple resident selection for a national or international event - \$500 (provided to the group as a whole)
- Team selection for a national or international event - \$750 (provided to the team as a whole)
- All other donations - maximum \$250

Are you seeking in-kind support? *

- Yes
- No

If yes, please provide details of the in-kind support requested

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Please provide details of any other funding you've applied for to support this project / activity (including from Council or any other sources) *

Have you received sponsorship funding from Council, or support through any of Council's grant programs in the past? *

- Yes
 No

If yes, please provide details, including year/s and amount of support received

Representation at national or international events

This section only needs to be completed if you are applying for support for local representation in a recognised national sporting or other event, or in an international sporting event. Please provide an outline of how you were selected for participation in this event.

Attach evidence of your selection, if applicable

Attach a file:

Attach additional evidence, if applicable

Attach a file:

Contact person for association organising the event / tournament

Individual Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Contact person's position

Contact person's email

Contact person's phone

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Are you aware of any other City of Wollongong resident who has qualified or is participating in this event?

- Yes
 No

If yes, please provide details (eg name, residential address)

Not-for-profit and charitable organisations

This section only needs to be completed if you are applying for support as a not-for-profit or charitable organisation. Do you / your organisation derive the majority of revenue from donations or public subscriptions?

- Yes
 No

Do you / your organisation provide a recognised necessary community service which would otherwise not exist?

- Yes
 No

If yes, please describe the service you provide *

Additional Attachments

Please attach any further documents that will support your application for funding. If you are having trouble attaching documents, please forward to events@wollongong.nsw.gov.au

Attach a file:

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Attach a File

Attach a file:

Submit your Application

* indicates a required field

I certify that to the best of my knowledge the statements made within this application are true and correct.

I agree *

Yes

Applicant Feedback

Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process.

Very easy Easy Neutral Difficult Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60

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