

Playford Alive Initiatives Fund

Application for Round 19

Project title:	
Organisation name:	

Playford Alive is a
partnership between:



Renewal SA

Playford Alive Initiatives Fund (PAIF)

Application for Round 19

Before you begin

Please read the Playford Alive Initiatives Fund Program Guidelines before completing this application.

- You may complete this form online or fill it out clearly using black or blue pen.
- Electronic copies of the Application and Guidelines are available at www.playfordalive.com.au.

To apply, submit your completed application to:

Debra Marchant
Executive Officer – Playford Alive Initiatives Fund

Playford Operations Centre
12 Bishopstone Road, Davoren Park SA 5113

Email: mayorandcouncilloradmin@playford.sa.gov.au

Applications close: XXXXXX

Aims of the fund

The Fund supports locally based community projects or activities that make a positive contribution to the integration and wellbeing of existing and new communities within, or on the periphery of, the Playford Alive Urban Renewal Project area (Smithfield Plains, Davoren Park, Munno Para, Andrews Farm and Eyre).

Eligible organisations

Eligible organisations include local groups and non-government organisations delivering projects or programs in:

- Social welfare
- Sport
- Culture and arts
- Support for disadvantaged individuals, families or communities
- Community participation or engagement

Section 1 | Project information

Project title:	
Organisation name:	

Project dates:

Start: ____ / ____ / ____

Finish: ____ / ____ / ____

Preferred month of payment

Some projects may wish to commence immediately

Date of payment (month): _____

Organisation details

Contact name:			
Position:			
Phone number:		Email:	
Organisation address:			

Is your organisation an Incorporated Body? ☐ **Yes** ☐ **No**

*If **No**, you must arrange for an auspice organisation to manage the financial aspects of the grant.*

Auspice organisation details (if applicable)

Contact name:			
Organisation:			
Position:			
Phone number:		Email:	
Organisation address:			

Background

How long has the group been formed? _____ years _____ months

What is the purpose of the group?

The project

Please describe the project or initiative you are seeking funding for.

In your response, outline:

- What the funding will be used for
- The purpose and objectives of the project
- The intended outcomes for the community

Expected outcomes

Select all outcomes your project will deliver

☐	Supports and strengthens community groups
☐	Supports and encourages volunteering
☐	Increases and enhances community participation
☐	Supports arts and cultural development
☐	Promotes healthy lifestyles
☐	Provides access to leisure, recreational and / or sporting opportunities
☐	Supports learning opportunities that meet local community needs
☐	Encourages partnerships to build a safe community
☐	Promotes a positive image of the Playford Alive project and community
☐	Supports the creation of local employment opportunities
☐	Provides life management skills
☐	Addresses issues of special needs groups
☐	Delivers community infrastructure
☐	Other: _____

Sustainability

How will your organisation maintain the project after PAIF funding has been used?

Section 2 | Financial information

Project cost, funding and timeframe

Provide a detailed overview of your project budget and timeline. You may complete the table below or attach a separate budget.

Include:

- Total project cost
- Amount requested from PAIF (excluding GST)
- Other funding secured or sought (cash or in-kind)
- Proposed project timeframe

Attach supporting documentation (eg quotes or cost estimates) where available.

Applicants must demonstrate their contribution to the project (financial, volunteer time or in-kind support). Matching contributions will be considered during assessment.

Income (excluding GST)

Income	Amount
Organisation contribution (if applicable)	\$ _____
Additional funds received or applied	\$ _____
Funding body name:	_____
Status of application:	☐ Approved ☐ Unknown
Amount requested from PAIF (excluding GST)	\$ _____
TOTAL INCOME	\$ _____
TOTAL PROJECT COST (excluding GST)	\$ _____
Other funding contribution (if applicable)	\$ _____

Is there a shortfall you will need to raise? ☐ Yes Amount \$ _____ ☐ No

Volunteer / officer contribution

Many projects rely on volunteer or officer support. Please indicate the level of assistance provided.

To calculate the value of volunteer/officer input: **Total hours x \$20 per hour.**

In-kind contribution (if applicable)	\$ _____
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Project funding

If successful, will the PAIF grant provide sufficient funding to complete the project?

☐ Yes ☐ No

If PAIF can only partly fund your project, would it still proceed?

☐ Yes ☐ No

Additional comments:

Section 3 | Certification

To be completed by the financially responsible person and one other authorised representative.

Supporting documents (quotes, cost estimates) attached: ☐ Yes ☐ No

Certification

We certify that the information provided in this application is true and accurate. We acknowledge and accept the Project Report and Acquittal Form requirements as outlined in the Playford Alive Initiatives Fund Guidelines and confirm that we have reviewed these documents to fully understand the obligations associated with accepting this grant.

Print name:			
Organisation:			
Signature:		Date:	____ / ____ / ____

Print name:			
Organisation:			
Signature:		Date:	____ / ____ / ____

Playford Alive Initiatives Fund (PAIF) Application Evaluation

Thank you for taking the time to complete your application. To help us keep the process simple and effective, please answer the questions below.

1. Time spent on application

Approximately how many hours did you spend completing the application and gathering the required information? _____ hours

2. Suggestions for improvement

What improvements would you recommend for the Application Form or the application process?

3. How you heard about the program

How did you first learn about the Playford Alive Initiatives Fund?

☐ Letter	☐ Facebook
☐ North Is Up	☐ Website
☐ Word of Mouth	☐ Other _____

4. Access to information

How easy was it to find information about the Fund program?

Please select one

☐	Very easy
☐	Easy
☐	Neutral
☐	Difficult
☐	Very difficult

Thank you for completing this evaluation. Please include this form with your application documents.

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