

The Karen Fitzgerald Fund Grant Application Form

The Karen Fitzgerald Fund
in partnership with



Request Originating From

Individual Government Non-Government Organisation

Grant Type

Individual Grant Program Proposal

Funding Details

Amount Requested

Brief description of application

Quotes Obtained:

YES NO N/A

Quotes Attached:

YES NO N/A

Applicant Details

First Name

Last Name

Organisation

Position

Address

City

State

Postcode

Mobile Phone

Organisation Phone

ABN

Email Address

Grant/Project Proposal

Please provide a description of the project/funding request.

What is the objective and planned outcomes of the project?

Target Group

What is the demographic and/or geographical area the project will benefit?

Stakeholders

Who are the staff/volunteers involved and/or other agencies/services?

Timeframe

What is the expected timeframe?

Evaluation and Reporting

How will the project be evaluated and reported back to the Karen Fitzgerald Fund?

Funding Requested

Are there any co-contributors to this request?

YES NO

Item	Co-Contributor	The Karen Fitzgerald Fund	Total
<div style="background-color: #cccccc; height: 20px;"></div>	<div style="background-color: #cccccc; height: 20px;"></div>	<div style="background-color: #cccccc; height: 20px;"></div>	<div style="background-color: #cccccc; height: 20px;"></div>
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In-Kind Support

Is there any in-kind support behind this request?

YES NO

Item	Contributor	Estimated Value
<div style="background-color: #cccccc; height: 20px;"></div>	<div style="background-color: #cccccc; height: 20px;"></div>	<div style="background-color: #cccccc; height: 20px;"></div>
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Other Funding Sources

Have all other alternative funding sources been explored?

YES NO

Please provide details of all alternative funding sources considered

Conditions of Funding

- 1) Funding is strictly for the originally approved activity or program. If the circumstances change, and the agreed purpose cannot be met, this must be discussed with the Karen Fitzgerald Fund.
- 2) If the activity or program is facilitated at lesser cost than the grant, any surplus will be retained by the Karen Fitzgerald Fund.
- 3) The grant must be fully utilised within twelve months of the approval.
- 4) The applicant and/or the organisation they represent, agree to acknowledge the Karen Fitzgerald Fund and Flinders Foundation in relevant promotional material.
- 5) The applicant and/or the organisation they represent must seek approval prior to using the Karen Fitzgerald Fund and the Flinders Foundation name or logo in any public way, including on websites and social media.
- 6) The Karen Fitzgerald Fund may request the applicant and/or the organisation they represent, to cooperate with promotions and marketing which may be organised by the Karen Fitzgerald Fund and/or Flinders Foundation.
- 7) Following a successful grant, the applicant must provide an evaluation report to the Karen Fitzgerald Fund within 4 weeks of the completion of the project demonstrating how it benefited children/young people.
- 8) Receipts, accounts and payments will be documented and provided to the Karen Fitzgerald Fund for acquittal purposes within 4 weeks of the completion of the project.
- 9) The application must be signed by a Manager and/or Director of the organisation the applicant is representing, indicating that the submission of the application is supported by Management.
- 10) The Karen Fitzgerald Fund does not accept any liability for injury, loss or damage incurred to any party as a result of funding received.
- 11) The Karen Fitzgerald Fund makes recommendations to Flinders Foundation for 'approval to pay' based on funds being available, the merit of this application in meeting the Guidelines and in comparison to other applications received. The decisions made by the Karen Fitzgerald Fund Committee and Flinders Foundation are final.

Declaration

- We declare that the information supplied in this application is true and accurate to the best of our knowledge.
- We acknowledge and agree to the Conditions of Grant Funding.
- We understand this is a one-off grant fund, which does not involve ongoing financial commitment from the Karen Fitzgerald Fund without further application.

Authorised by the Applicant

Full Name

Position

Signature

Date

Endorsed by the Manager/Director

Endorsed Not Endorsed

Full Name

Position

Signature

Date

Decision by the Karen Fitzgerald Fund

Approved Not Approved

Delegate Name

Position

Amount Approved

Special Conditions

Signature

Date

Decision by Flinders Foundation

Approved Not Approved

Delegate Name

Position

Amount Approved

Special Conditions

Signature

Date

HOW TO SUBMIT

Please forward this completed form, together with the supporting documentation to:

The Karen Fitzgerald Fund
10 Renown Ave, Seacliff Park, SA 5049
karenfitzgeraldfund@outlook.com

*To discuss an application or for assistance in preparing one, please contact
Steve Ramsey on 0430 313 548.*