



The Hon David
LITTLEPROUD MP
 FEDERAL MEMBER FOR MARANOVA



VOLUNTEER GRANTS 2024-25

EXPRESSION OF INTEREST FORM

Organisation Details:

Organisation Name: ABN:

Organisation Address:

Activity Address*:

*The activity address refers to the address where the volunteering activity occurs. If this is the same as the organisation address, this field can be left blank.

Your Details:

Primary Contact Details:

Name:
 Email:
 Mobile:

Secondary Contact Details:

Name:
 Email:
 Mobile:

Criteria: All funding sought must directly benefit your organisation's volunteers or volunteer run activities as per Category 1 and 2 below.

How will the grant activity enable your organisation's volunteers to address the needs of the local community and demonstrate value for money?

Do volunteers make up 40% or more of your organisation's staff? Yes No

What is the total amount of funding being sought? (between \$1,000 and \$5,000) \$

If applying under Category 1, which communication items are you seeking to purchase? (if applying under category 2, select NA)
 (note you can apply under more than one category)

- | | | |
|---|--|--|
| <input type="checkbox"/> Mobile phones, phone bills and radio communication devices | <input type="checkbox"/> Insurance premiums | <input type="checkbox"/> Internet service fees |
| <input type="checkbox"/> Computers, laptops and tablets | <input type="checkbox"/> Electronic audio and visual equipment | <input type="checkbox"/> NA |
| <input type="checkbox"/> Software | <input type="checkbox"/> Electronic payment devices (e.g. payment devices) | |



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If applying under Category 2, are you seeking to support volunteers under the age of 18 or volunteer run activities for the development and well-being of children? (you may select more than one) (If only applying under Category 1, please select NA)

- | | | |
|--|---|-----------------------------|
| <input type="checkbox"/> Purchase items or services for the main purpose of supporting a community organisation's <u>volunteers under the age of 18.</u> | <input type="checkbox"/> Fund volunteer-run activities within the community organisation for the main purpose of supporting children's (under 18) development and wellbeing, or parents/carers to develop the skills necessary to ensure a child's development. | <input type="checkbox"/> NA |
|--|---|-----------------------------|

If applying under Category 2 what items are you seeking to purchase? (If applying under 1 category only select NA) (note you can apply under more than one category)

- | | | |
|--|--|---|
| <input type="checkbox"/> Accessibility equipment | <input type="checkbox"/> First aid, safety and hygiene | <input type="checkbox"/> Sport and recreation equipment |
| <input type="checkbox"/> Background screening checks of volunteers | <input type="checkbox"/> Food preparation equipment and appliances | <input type="checkbox"/> Storage |
| <input type="checkbox"/> Computers, laptops, tablets and relevant software | <input type="checkbox"/> Furniture | <input type="checkbox"/> Tools |
| <input type="checkbox"/> Educational equipment | <input type="checkbox"/> Grounds maintenance | <input type="checkbox"/> Training |
| <input type="checkbox"/> Electronic audio and visual | <input type="checkbox"/> Heat/cooling (portable) | <input type="checkbox"/> Travel/fuel costs |
| <input type="checkbox"/> Event costs including promotion of volunteering opportunities | <input type="checkbox"/> Office equipment | <input type="checkbox"/> Whitegoods and appliances |
| | <input type="checkbox"/> Promotion of volunteering opportunities | <input type="checkbox"/> NA |

Has anyone from your organisation submitted an expression of interest in another electorate? Yes No

Further Information

All applications will be assessed by a Community Committee. Grants are not ongoing and if your organisation is nominated by your local Federal Member of Parliament you will be invited to apply for a grant which will be assessed by the Department of Social Services after the expression of interest process has been finalised. Please attach any supporting documentation i.e. letters of support. Please be aware that if your organisation is nominated to apply for a Volunteer Grant, some or all of this information will be shared with the Department of Social Services.

Note: If your organisation is an unincorporated association, a person connected to your organisation will be required to assume personal legal liability. The person will be legally liable for the delivery of the funded activity, expenditure of funds and any other associated obligations arising from the grant agreement. For more information see **Section 4** of the [Grant Opportunity Guidelines](#).

I declare that the details provided above, to the best of my knowledge, are true and correct

Full Name of Authorised Representative

Authorised Representative Signature

**Expressions of interest applications close
5pm, Friday 3 January 2025**

Please return to:

David Littleproud MP, PO Box 641, Dalby QLD 4405

Email. david.littleproud.mp@aph.gov.au