

Community Environment Grant Application Form 2026-2027

Form Preview

Eligibility Checklist

* indicates a required field

Please contact Council's Environmental Officers to discuss your eligibility and project ideas prior to completing this application form.

Are you applying on behalf of: *

- A not-for-profit incorporated community group?
- An unincorporated community group being auspiced by an incorporated association?
- A school or kindergarten?
- Other:

Only not-for profit incorporated community groups, schools and kindergartens are eligible to apply for this grant, or unincorporated groups being auspiced by an incorporated association.

Is your project or activity taking place in the Alexandrina Council region? *

- Yes
- No

Projects or activities occurring outside the Alexandrina Council Region are not eligible for funding.

Does your application include requests for retrospective funding or ongoing operational or administrative costs? *

- Yes
- No

Requests for retrospective payments, ongoing operational or administrative costs are not eligible for funding.

Are you an Elected Member or employee of Alexandrina Council? *

- Yes
- No

Alexandrina Council Elected Members or employees are not eligible to apply for this grant.

Has your organisation completed all reporting and acquittal requirements for any grant funding previously received from Alexandrina Council? *

- Yes
- No
- Not Applicable

Only entities that have completed all reporting and acquittal requirements for previous grant funding from Alexandrina Council are eligible to apply for this grant. If you have not received funding from Alexandrina Council previously, please select "Not Applicable".

Does your organisation have any outstanding debts to Alexandrina Council? *

- Yes
- No

Entities with outstanding debts such as rates, fees or charges to Alexandrina Council are not eligible to apply for this grant.

Eligibility Check

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PLEASE NOTE: One or more of your responses to the Eligibility Checklist questions indicates that you may not be eligible to apply for this grant. Please contact Alexandrina Council's Environmental Officers or Grants Officer on 08 8555 7000 to discuss your eligibility.

Applicant Details

* indicates a required field

Applicant Organisation *

Organisation Name

Primary Address *

Address

Postal Address *

Address

Website

Applicant ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	

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Main business location

Please attach a Certificate of Currency for your Public Liability Insurance. *

Attach a file:

Primary Contact Name *

First Name

Last Name

Position in Organisation *

Primary Contact Phone Number *

Primary Contact Email Address *

Alternative Contact Name

First Name

Last Name

Position in Organisation

Alternative Contact Phone Number

Alternative Contact Email Address

Auspicing Arrangements

* indicates a required field

Auspice Contact Name *

First Name

Last Name

Name of Auspicing Organisation *

Organisation Name

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Auspice ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Auspice Postal Address *

Address

Auspice Contact Phone Number *

Auspice Contact Email Address *

Please attach a letter from your Auspicing Organisation confirming their agreement to auspice this grant on your behalf. *

Attach a file:

Project Details

* indicates a required field

Project Details

Project Title *

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Brief Project Description *

Word count:

Must be between 100 and 200 words.

Provide a short description of your project - what do you intend to do?

Project Location

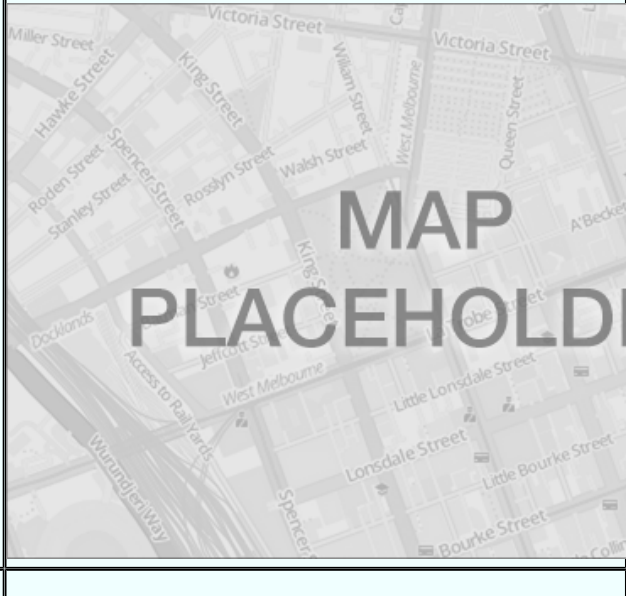
Please specify the location of your project or work site(s).

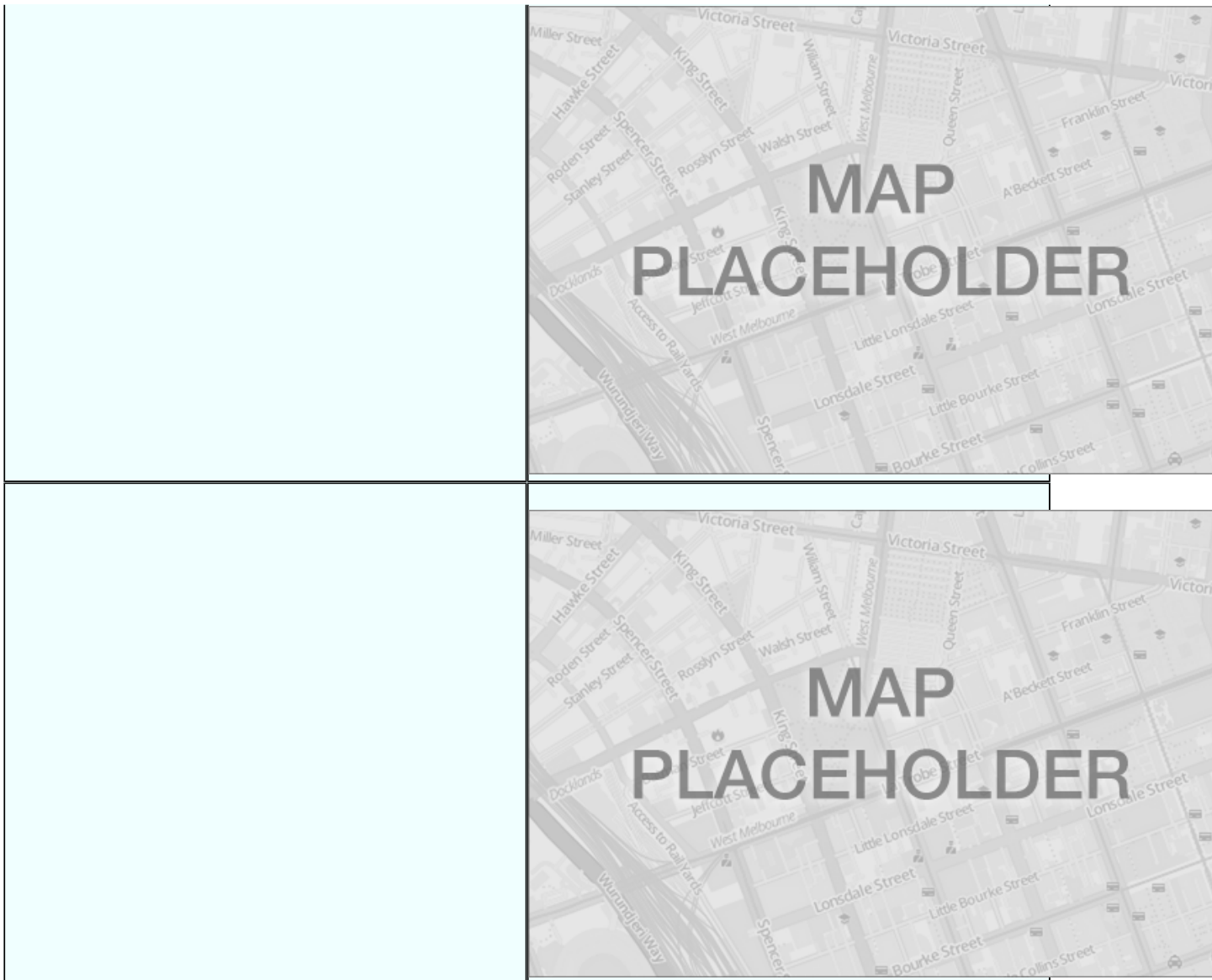
At least one project location must be provided.

More rows can be added if required.

Site Name

Address

Site Name	Address
	 A map placeholder showing a street grid in Melbourne, Australia. The map is overlaid with the text "MAP PLACEHOLDER" in large, bold, grey letters. Visible street names include Victoria Street, King Street, William Street, West Melbourne, Queen Street, Franklin Street, A'Beckett Street, Lonsdale Street, Little Lonsdale Street, Little Bourke Street, Bourke Street, Collins Street, Wundwin Way, Access to Rail Yards, West Melbourne, Spencer Street, Roslyn Street, Walsh Street, King Street, Stanley Street, Roden Street, Hawke Street, Miller Street, and Docklands.



Biodiversity

Does your project focus on enhancing biodiversity via on-ground works? *

- Yes
- No

Location of Biodiversity Enhancement Projects

Does your project take place on Council land and/or adjacent private Land? *

- Yes
- No

PLEASE NOTE

Projects which focus on enhancing biodiversity and increase of canopy cover via on-ground works must be undertaken on Council land and/or adjacent private lands. Projects on

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private land will only be approved if the purpose of the project is to buffer and/or improve biodiversity outcomes.

Please refer to grant Guidelines for more information or discuss with Council's Environmental Officers.

For all biodiversity projects:

- all plants grown or sourced must be of local provenance
- a detailed work plan must be agreed with Council prior to commencement of works
- permission must be sought and granted for any works undertaken on Council land. Approval processes may differ according to the nature and location of works but may require submission of a permit application or a license agreement with Council.

Please discuss the specific requirements of your project with Council's Environmental Officers before proceeding with your application.

Approved Site Action Plan

Has a Site Action Plan already been developed for this project and approved by Council? *

- Yes
- No

Site Action Plan

Please upload your project Site Action Plan here. *

Attach a file:

Currency of Site Action Plan

Are any changes required to your existing Site Action Plan? *

- Yes - minor changes only
- Yes - a new Site Action Plan is required
- No

Site Action Plan Changes

Please outline below what changes are required to your Site Action Plan. *

Project Details

Please attach evidence of landowner consent for this project where relevant.

Attach a file:

Project Start Date *

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Must be a date and between 1/9/2026 and 31/12/2027.
Projects should not commence before notification of grant application outcome.

Project End Date *

Must be a date and between 1/9/2026 and 31/12/2027.
Projects should be completed by 31 December 2027.

Total Amount Requested *

\$

What is the total financial support you are requesting in this application? Requests must be no more than \$4,000.

Total Project Cost *

\$

What is the total budgeted cost of your project? This amount is calculated.

Capacity to Deliver Project

Please outline your organisation's capacity to deliver the project within the above timeframes. *

Word count:

Must be at least 100 words.

Relevant information may include the strength of your volunteer base, your group's history of delivering similar projects, project readiness etc.

Project Timeline

Project Activity	Activity Start Date	Activity Finish Date

Site Action Plan

Site Action Plan

The information below will be used to inform a new or revised Site Action Plan for your project. Please provide some background information on your group's purpose and achievements to date, and provide at least 3 project goals and 3 project actions. More rows can be added if required. If unsure, please contact Council's Environmental Officers for guidance.

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Group History, Purpose and Achievements

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Tell us about your group's activities to date. When and why did your group start? What projects have you undertaken so far?

Site Goals

** Note all plant species need to be approved by Alexandrina Environment or Technical staff prior to revegetation to ensure that conservation and biodiversity integrity is retained.*

Project Goals

Please enter at least 3 project goals (more rows can be added if required). Examples include restoration, revegetation species list, climate resilience, community engagement, weed control and vision.

Site Actions

** Note deguarding and disposal of guards is the responsibility of the volunteer group.*

Project Actions

Please enter at least 3 project actions (more rows can be added if required). Examples include planting, watering, de-guarding, weed control techniques and follow-up.

Project Budget

** indicates a required field*

Budget Information

Please provide proposed income and expenditure for the project below, including grant funding requested, other funding sources and own cash contributions.

If your business or association is registered for GST, please use GST exclusive amounts throughout.

Applicants are required to make a co-contribution towards the project (either cash or in-kind) and the level of co-contribution made will contribute to your assessment score.

"Total Project Expenditure" should equal "Total Project Income".

Budget: Income

Description of income items (please do not include any in-kind contributions) \$

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in this table as they are requested in a separate table below)

	\$
	\$
	\$
	\$
	\$

Budget: Expenditure

Description of expenditure items (please \$ do not include any in-kind contributions in this table as they are requested in a separate table below)

	\$
	\$
	\$
	\$
	\$

Budget Totals

Total Project Income *

\$

This number/amount is calculated.

Total Project Expenditure *

\$

This number/amount is calculated.

PLEASE NOTE:

"Total Project Expenditure" should equal "Total Project Income".

Volunteer Contribution

The value of standard volunteer hours contributed to the project will be calculated at the current volunteering dollar replacement hourly rate figure for South Australia as advised by Volunteering SA. This is currently \$50.50.

[About - Volunteering SANT \(volunteeringsa-nt.org.au\)](http://volunteeringsa-nt.org.au)

The value of any specialist knowledge or assistance contributed to the project should be added in the "in-kind contributions section" costed at estimated market value.

How many volunteers will work on this project? *

Must be a whole number (no decimal place).

How many volunteer hours will this project take to complete? *

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Must be a whole number (no decimal place).

Total value of volunteer contribution to this project.

\$

This number/amount is calculated.

In-kind Contributions

Please provide details of any other non-cash in-kind contributions your business or organisation or any other third parties are contributing to the project. Please do not include standard volunteer hours in this section as they have already been captured above.

Budget

Description of In-kind Contributions (excluding volunteer contributions)

\$

Description of In-kind Contributions (excluding volunteer contributions)	\$
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>

Budget Totals

Total other In-kind Contributions

\$

This number/amount is calculated.

Budget Documents

Applicants must provide a fully itemised budget including details of their own and other co-contributions, cash or in-kind, and any other funding received or expected. Quotes, screenshots, calculations or other supporting documents should be provided for all expenditure items.

Please attach any relevant financial information below e.g. quotes for expenditure items, confirmation of funding from other sources etc. *

Attach a file:

Grant Funding Requirements

If demand for grant funding for eligible projects exceeds available funds, partial funding of projects may sometimes be considered.

Would your project still proceed if you were offered 75% of your requested grant amount? *

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- Yes
- No

Would your project still proceed if you were offered 50% of your requested grant amount? *

- Yes
- No

How would receiving less grant funding than requested impact on your ability to deliver your project? *

Assessment Criteria

* indicates a required field

Strategic Alignment

Which of the following strategies, action areas or aspirations does your project help to achieve? Please tick all that apply. *

- Environmental Action Plan: Biodiversity
- Environmental Action Plan: Waters
- Environmental Action Plan: Community
- A2040: Climate-smart and resilient community
- A2040: Thriving ecosystems and biodiversity
- A2040: Sustainable resource use and environmental health
- Other:

At least 1 choice must be selected.

Please describe how your project helps to achieve the strategic objectives outlined above. *

Word count:

Must be between 200 and 500 words.

The primary objective of the Community Environment Grant program is to support the community in achieving local environmental and sustainable outcomes that benefit the Alexandrina region.

What local environmental or sustainable benefits are expected for the Alexandrina region from the delivery of your project? *

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Word count:
Must be between 200 and 500 words.

Please attach any additional documentation here to support your application.
Attach a file:

Examples include:

- Your organisation's strategic plan
- Evidence of impact for similar projects
- Maps or site plans
- Photographs of work sites
- Plant lists

Process Evaluation

* indicates a required field

How many hours did you spend on preparing this grant application? *

Must be a whole number (no decimal place).

Please rate your overall satisfaction with the grant application process (1 = low, 10 = high). *

0 1 2 3 4 5 6 7 8 9 10

Please let us know how you think we could improve the grant application process.

Declaration and Privacy Statement

* indicates a required field

Pre-submission Checklist

I have discussed my project idea with Council's Environmental Officers *

Yes

I have checked whether my project will require any permits or approvals and understand I am required to obtain these before my project commences *

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Yes

I have attached all requested supporting documentation to my application *

Yes

Organisation Declaration

Declaration and Privacy Statement

I, being the individual making this declaration, confirm and agree that:

- 1.all details supplied in this application and in any attached documents are true and correct to the best of my knowledge.
- 2.the application has been submitted with the full knowledge and agreement of the office bearers of the organisation listed on this application.
- 3.I will contact Alexandrina Council immediately if any information provided in this application changes.
- 4.I understand that if successful I will be required to sign a Funding Agreement prior to funds being provided.
- 5.funding received from Alexandrina Council will be used for the approved activity or project and Council must approve any changes to the activity/project.
- 6.any moneys not expended on completion of the activity/project will be returned to Alexandrina Council.
- 7.Alexandrina Council will be acknowledged in any publications or publicity regarding the activity/project.
- 8.recipients must abide by the terms and conditions of the Funding Agreement or funds may be withdrawn.
- 9.an Evaluation/Acquittal report with receipts will be submitted to Alexandrina Council within two months of the project completion date.

Alexandrina Council respects all personal and confidential information received and will do everything possible to protect information from unauthorised access, loss or misuse. Information collected from you is required for the delivery of the services in accordance with the Council's powers, functions and purposes. It may also be used by the Council and their representatives to conduct research and customer satisfaction surveys so that we may better understand community needs and can improve service delivery. I understand that the information above will be used in accordance with relevant legislation.

I confirm that I accept the above Declaration and Privacy Statement on behalf of the organisation listed on this application. *

Yes

Name *

First Name

Last Name

Position *

Date of Declaration *

Must be a date and between 4/5/2026 and 30/6/2026.

