

STRONGER COMMUNITY GRANTS

EXPRESSION OF INTEREST FORM

please return completed form to David.Feeney.MP@aph.gov.au

FIRST NAME:

LAST NAME:

ORGANISATION:

POSITION IN ORGANISATION:

EMAIL:

PHONE:

MOBILE:

ADDRESS:

WHAT DOES YOUR ORGANISATION DO?

BRIEFLY DESCRIBE YOUR PROJECT AND THE BENEFIT IT WILL BRING OUR COMMUNITY.

HOW MUCH FUNDING ARE YOU SEEKING FOR THIS PROJECT?

DOES YOUR PROJECT HAVE MATCHED CONTRIBUTIONS FOR THE AMOUNT SOUGHT?

HAVE YOU REVIEWED THE STRONGER COMMUNITIES ELIGIBILITY REQUIREMENTS?