

# **GIPPSDAIRY GRANT APPLICATION FORM**

Q2. Contact details				
Address				
Telephone no				
Email Address				
Q3. Other key conta	act person(s)			
Name	Role	Phone	Email	
Q4. Applicant name		nisation, group or bu	siness applying for the	funding
Address				
Telephone no				
. 0.000				
Email Address				



Please attach copy of evidence of insurance. Q7. Proposed project title Q8. Proposed commencement date of project (must be after 1 Jan) Q9. Proposed completion date of project (please provide further information if the project will be longer than 12 months) Q10. THE PROJECT Project outline and background (if insufficient space, please complete on another page and attach to application) Aim: (What is expected to be achieved) **Method:** (How will your project be delivered and who is involved?) **Outcomes:** (What will be created or learnt from delivering your project that can be used by farmers?) Success: (how will you measure success so that you can know that your outcomes have been achieved?) Project Timeline: (When will key steps in your project occur?)



## **Q11. BENEFITS**

Benefits to applicant organisation or business:
Benefits to the Gippsland Dairy industry and farmers:
How do your goals align with GippsDairy strategic priorities as listed in the current GippsDairy Strategic Plan? Note the GippsDairy Strategic Plan 2020-2025 is located on the Dairy Australia website.  GippsDairy Strategic Plan 2020-25   Dairy Australia
Q12. LEGISLATIVE AND OTHER REQUIREMENTS
Please list any legislative, event requirements (e.g. local government permits or conditions), ethical guidelines and or research requirements that need to be considered when delivering this project?



#### Q13. BUDGET

INCOME TYPE	AMOUNT	EXPENDITURE TYPE	AMOUNT
Funds from other sources, please identify sources		People project delivery costs – consultants, staff support, researchers etc.	
Funds from applicant organisation/farm/ business/group		Operating Costs: eg. Materials, Equipment etc.	
GippsDairy grant		Other eg. Travel, promotion etc, please list	
Other (please specify)		In kind support for the project, please list	
Total Income Income and expenditure totals must be equal.		<b>Total Expenditure</b> Expenditure and income totals must be equal	
Total funds sought from GippsDairy			

\*\*\*\*\*Note for any single expenditure items over \$3,000 please provide a written quote attached to your application.

### **Application declaration**

I, ......, have read and understood the conditions attached to the GippsDairy Grant Guidelines and, if successful, agree to adhere to them as a condition of receipt of funding from GippsDairy. To the best of my knowledge, all the information and details provided in the application (including annexures) are correct.

Signature	Name	Position Held	Date

#### Send to:

GippsDairy Regional Extension Officer – Richard Ockerse PO Box 1059 Warragul 3820

email: info@gippdairy.com.au