Form Preview

Important Information

* indicates a required field

COMMUNITY STRENGTHENING GRANTS

2024 APPLICATION

Council's Community Strengthening Grants Program has been a valuable source of financial support for local events and projects in Golden Plains Shire communities for over 26 years. There are two rounds of grants each year with applications opening in March and September.

Grants of up to \$10,000 are available in four streams: 1. Healthy Active Living 2. Creative Community 3. Environment and Sustainability 4. Community Safety

Before completing this grant application form, you must have read and understood the Community Strengthening Grants Standard Guidelines. Please click here to view the 2024 Community Strengthening Grants Guidelines.

- If you have any questions regarding the eligibility criteria, please contact Community Development and Grants Officer on 5220 7111 or email: communitygrants@gplains.vic.gov.au.
- Incomplete applications and/or applications received after the closing date will not be considered.
- 2024 Community Strengthening Grants opens on 1st August 2024 and closes at 2pm on 2nd September 2024.

CONFIRMATION OF ELIGIBILITY

This section is designed to help you, and us, understand if you are eligible for this grant.

Ha	ve you	read the	Communit	y Strengthe	ning Gran	ts Standard	d Guidelines	and
do	es youi	r project	meet eligib	ility criteria	? *			
\bigcirc	Yes							

IMPORTANT: If you have not read the Community Strengthening Grants Standard Guidelines, you cannot proceed with your grant application. Please click here to read the Community Strengthening Grants Standard Guidelines.

Have you acquitted most recent funding with Golden Plains Shire Council? *

- Yes
- No
- O No, however it's not overdue
- Never been funded

If your previous funded project is overdue then your application may not be eligible for the current round. Please contact Community Development and Grants Officer on 03 5220 7111.

Have you discussed your project with a Council Officer? *

- O Yes
- O No

Form Preview

Which objective best relates to your project under the Council Plan? * Please click here to view the Council Plan. *
Please click <u>here</u> to view the Council Plan. *
Please click <u>here</u> to view the Council Plan. *
Please click <u>here</u> to view the Council Plan. *
Please click <u>here</u> to view the Council Plan. *
*
*
*
*
*
*
*
*

Project Pre-Checklist

* indicates a required field

It is your responsibility as the applicant to apply for, fund and obtain all required permits for the project (incl. food handling, planning, building or local laws permits).

If you answered "YES" to any of the below questions, it is likely that you are required to obtain permits for your proposed activity. Please ensure that you include costs relating to any permits and/or consultation in your expenditure list in this application form.

Funding through this Community Strengthening Grants program does not constitute approval of required permits. Even if your application is successful, payment of your funding is conditional on associated permits being obtained.

If your project has a possibility of interaction with children and/or young people, please visit <u>Do I need a Check? | Working with Children</u> as it will provide guidance about when a Working With Children Check is required.

Please contact Council's Community Development and Grants Officer on (03) 5220 7111 or email: communitygrants@gplains.vic.gov.au if you are unsure of your answer or would like to discuss the requirements for building, planning, local laws and/or food handling permits.

2024 Creative Community Grants Form Preview

Are you organising an event or festival? * O Yes O No
Will any native vegetation be cleared or disturbed during this project? * ○ Yes ○ No
Will you be constructing a permanent or temporary structure during this project? * ○ Yes ○ No
If YES, will this structure be attached to an existing structure or have a roof? * ○ Yes ○ No
Will you be undertaking any structural changes to an existing building such as reblocking, maintenance, material removal or demolition works? * ○ Yes ○ No
Are any excavation works involved in this project? * O Yes O No
Will you be building a dam or water bore as part of this project? * ○ Yes ○ No
Will you be providing or selling food as part of this project? * ○ Yes ○ No
Will this project require any variation or blockage to traffic flow? * ○ Yes ○ No
Will this project involve high volume traffic (both vehicle and pedestrian) in public areas? * O Yes O No
Will the project involve alteration to or installation of a septic? * ○ Yes ○ No

Form Preview

Is the project associated with any heritage overlay? * O Yes O No
Please check the Heritage Victoria's online map tool (click here) to assist you.
Does your proposed activity disturb or impact the ground and occur within areas of Aboriginal cultural heritage sensitivity? * O Yes
No Please check the Aboriginal Cultural Heritage Register and Information System (ACHRIS) online map tool on the Aboriginal Victoria website (click here) to assist you.
Please contact Council's Community Development & Grants Officer on 5220 7111 or email: communitygrants@gplains.vic.gov.au prior to submission your application if the proposed activity occurs within areas of Aboriginal cultural heritage sensitivity.
Event / Festival Project Pre-Checklist
* indicates a required field
If you are organising an event or festival, please review information on Council's <u>'Planning an Event' website</u> to ensure that you understand Council's requirements to hold an event in the Shire.
Here is a <u>link</u> to access the Business Victoria's guided event planning tool to assist you in delivering a successful and safe event.
Please contact Council's Community Development and Grants Officer on (03) 5220 7111 or email: communitygrants@gplains.vic.gov.au if you need to discuss further.
You must ensure that your organisation complies with the following before submitting your grant application.
Risk Management Plan
Please provide an appropriate Risk Management Plan. Template can be found <u>here</u> .
* Attach a file:
Site Plan

Please provide a site plan. Guidelines can be found <u>here</u>.

2024 Creative Community Grants Form Preview

*
Attach a file:
Traffic Management
Provide a Traffic Management Plan (if relevant). Guidelines can be found here.
Attach a file:
Child Safety
Will children and/or young people be in attendance at your event or festival? * ○ Yes ○ No
Working With Children Check (WWCC)
Please visit <u>Do I need a Check? Working with Children</u> as it will provide guidance about when a WWCC is required.
If your event or festival is aimed at children and/or young people (with the possibility of interaction happening without a guardian or adult) that all paid staff/organisers should have a valid WWCC. All the volunteers should have a volunteering WWCC.
Also, please consider developing a Child Safety Plan. Template can be found here (p.7-12 are most relevant to community groups).
Council Permits
If you answered "YES" to any of the below questions, it is likely that you are required to obtain permits for your proposed activity. Please ensure that you include costs relating to any permits and/or consultation in your expenditure list in this application form.
Funding through our Community Strengthening Grants does not constitute approval of required permits. Even if your application is successful, payment of your funding is conditional on associated permits being obtained.
Will this project require any variation or blockage to traffic flow? * ○ Yes ○ No
Will you be providing or selling food as part of this project? * ○ Yes ○ No

Form Preview

Will this project involve high volume traffic (both vehicle and areas? * ○ Yes ○ No	pedestrian) in public
Please list below all the required permits for your proposed e	vent or festival. *

Organisation Details

* indicates a required field

Collection Notice

Personal information collected on this form will be used by Council's Community Development Team in order to process the application and support the proposed project if the application is successful.

Council may disclose your information to other internal departments in order to assess the application and support the project if the application is successful and will not be disclosed to any external party without your consent, unless required to do so by law. Successful grant recipients will be presented to and disclosed at a Council meeting which is open to the public, recorded in public Council meeting records, and may be included in media releases.

If you do not provide us with all required information Council will not be able to assess/ process the grant's application. You have the right to access your personal information and make any necessary corrections. If you have any queries or wish to gain access to amend your information, please contact Community Development and Grants Officer on (03) 5220 7111 or email communitygrants@gplains.vic.gov.au

Council will comply with its Privacy Policy and Information Privacy Principles in schedule 1 of the Privacy and Data Protection Act 2014 and the Health Records Act 2001 in relation to the use, storage and disclosure of information. If you have any queries regarding this Privacy Statement, please contact the Privacy Officer in writing to enquiries@gplains.vic.gov.au or PO Box 111, Bannockburn 3331.

Organisation Details

rganisation Name rganisation Name	*	

Please enter your organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Organisation Type *

- Incorporated
- Unincorporated

If you selected 'Unincorporated', you will need to seek an auspice arrangement to proceed with your grant application. An auspice agreement form can be found here.

Form Preview

What is your organisation's Incorporation Number? *
Does your organisation have an ABN? * O Yes O No
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 <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Must be an ABN.
If you do not have an ABN, please submit a completed ATO <u>Statement by a Supplier Form</u> with your application. Please upload completed Statement by Supplier Form. * Attach a file:
Select which not-for profit organisation best describes you? * Community Group Sports Club Lions / Rotary Club General not-for profit (i.e. none of the sub-types listed above) Educational institution (including kindergartens and schools) Peak Body Progress Association CFA or SES Please choose the option that best applies to your organisation. If none of the above items describe your organisation, select other and enter type in box.

2024 Creative Community Grants Form Preview

What is your organisation's purpose or mission? *
Does your organisation have volunteers? * O Yes O No
How many volunteers does your organisation / group have?
Organisation / Group Primary Address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation / Group Postal Address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation / Group Website
Must be a URL.
Contact Details
Primary Contact Person * Title First Name Last Name
This is the person we will correspond with about this grant.
Position held in Organisation *
e.g., Manager, Board Member or Fundraising Coordinator.
Primary Contact Phone Number *
a. y contact i none namber
Must be an Australian phone number.
Primary Contact Email Address *

Form Preview

This is the address we will use to correspond with you about this grant.
Secondary Contact Person *
Title First Name Last Name
Position held in Organisation *
Secondary Contact Phone Number *
Must be an Australian phone number.
Secondary Contact Email Address *
Must be an email address.
Public Liability Insurance (PLI)
Do you have Public Liability Insurance (PLI)? * O Yes
 No, however my auspice organisation provides PLI coverage for this grant project. No
You must provide insurance coverage for your grant project. Your project may not be covered in your usual insurance. Please talk to your insurance provider about appropriate cover for your project.
Please upload a Public Liability Insurance Certificate of Currency. * Attach a file:
Additional Insurance
Do you need additional/increased insurance to cover for the project? * ○ Yes ○ No
Please ensure to obtain a quote for the additional/increased insurance and include it in the budget.

Auspice Information

* indicates a required field

Form Preview

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.

- The auspice organisation is known as the Auspicor. Your community group or organisation is known as the grant recipient (Auspicee).
- The Auspicor must agree and understand that they will be responsible for the compulsory obligations set out in an auspice agreement form.

If your grant application is successful, the grant funds will be paid directly to the Auspicor, who must then pass on to the funds to the Auspicee.

If your organisation is auspiced to apply for this grant, you must:

- Complete the Golden Plains Shire Council's auspice agreement form and attach it to your application. An auspice agreement form can be found here;
- Ensure the Auspicor understands your grant application and all aspects of your project;
- Be aware that some auspice organisations may charge an auspice fee. This is at their discretion and should be negotiated between the Auspicee and the Auspicor;
- Make sure that you had a discussion with the Auspicor to ascertain if they are providing insurance cover for your grant project;
- Obtain an insurance quote and add the insurance cost as an item in your expenditure budget if the Auspicor cannot provide you with insurance (which does not include annual ongoing premiums); and
- Be aware that no project will be funded if you do not have insurance coverage.

Is your organisation auspiced by another organisation for the purpose of this grant? *
○ Yes ○ No
Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.
Auspice Organisation Details
Please attach a fully executed auspice agreement. * Attach a file:
The auspice agreement must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.
Auspice organisation name * Organisation Name
Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.
Auspice primary address Address
, red CSS

Form Preview

Auspice postal address Address
Address
Auspice primary phone number *
Must be an Australian phone number.
Auspice email address *
Must be an email address.
Auspice website
Must be a URL.
Primary contact person at auspice organisation *
Title First Name Last Name
We may contact this person to verify that the auspice arrangement is valid and current.
Position held in organisation *
e.g., Manager, Board Member or Fundraising Coordinator.
Auspice primary contact phone number *
Auspice primary contact phone number
Must be an Australian phone number.
Auspice primary contact email address *
Must be an email address
Does the auspice organisation have an ABN? *
○ Yes ○ No
Auguigo ADN *
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.

Form Preview

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type <u>More information</u>	
ACNC Registration	
Tax Concessions	
Main business location	
Must be an ABN.	
As the auspice organisation does not have an ABN, please sub Statement by a Supplier Form with your application.	mit a completed ATO
Please upload completed Statement of Supplier Form: * Attach a file:	·
Max 25mb per file uploaded	
What is the auspice organisation's Incorporation Number	ar? *
mat is the auspice organisation s meet peration number	
Project Details	
* indicates a required field	
·	
Project title: *	
Provide a name for your project/program/initiative. Your title should b	e short but descriptive
Project Location/s * Address	
Address Line 1 Suburb/Town State/Province Postcode and Country	are required

If there is more than one project location, please list them below.

Form Preview

be more successful.

Does your project require land/building/facility o ○ Yes ○ No	
If the community facility is on Council-owned land/property, with a Golden Plains Shire Council officer prior to submitting	
Please upload consent(s) from the owner of the Attach a file:	land/building/facility. *
A maximum of 5 files may be attached.	
A maximum of 5 mes may be attached.	
Please provide reasons as to why consent(s) is r	not required. *
Project Value	
Please provide a short summary of your project.	*
Be descriptive, but succinct. Include a brief summary of who what you will do (i.e. the activities you will perform), and wh activities (outcomes). Go to the Funding Centre's Answers B answersbank#Qu1 if you need some ideas about how to frame	at effects you expect to result from your ank at https://www.fundingcentre.com.au/
Why is the project needed in the community and	d how will your project address
the need? *	
Tell us why your project is needed, and why you believe the the outcomes you seek. Provide statistics/evidence (where a between the work you will do and the outcomes you seek. G at https://www.fundingcentre.com.au/answersbank#Qu2 if your response.	available) of both the need and the link to the Funding Centre's Answers Bank
, 3	
Does this initiative have community support? In	particular, do the beneficiary
and/or geographic communities affected by this activities you are proposing? *	
O Yes O No Evidence of community support is generally highly regarded	O Don't know I as projects with community buy-in tend to

2024 Creative Community Grants Form Preview

What evidence do you have that this pr	roject/program has community support?
Go to the Funding Centre's Answers Bank at	

Form Preview

What are the	e major steps	/ stages (i.e.	milestones)	involved in	delivering	your
project?						

For Example:

What is your timeline for the activity? Who is responsible for the activity? What needs to be done and who will do it? It is important to demonstrate how you will undertake your activity.

Milestone	Start Date (estimate if unknown)	Finish Date (estimate if unknown)	Location/s (if relevant)	Notes
e.g. planning; major activities; evaluation	Note: Start date cannot be before grants are awarded. Must be a date.	Note the grant project must be completed within the timeline of the grant program. Must be a date.	(e.g. add address, suburb, region if known; otherwise type 'unknown' or 'not applicable')	Add explanatory notes if required

success? *

Project Team			
Who is included in the project team and what is the	eir role? *		
Partnerships / Stakeholders			
In order to achieve your project goals you may need to partner with other organisations. Who are the project partners and what are their roles and expectations?			
Name of Partners / Stakeholders Roles/Expectations			
Further Project Planning			
Please use space below if you have any further infeproject planning (e.g. additional steps, methodolog			
Project Objectives			

What are some of the obstacles in reaching these objectives? What are the possible solutions to these obstacles? *

What are the objectives of the project and what will be the key indicators of

Form Preview

Outcomes

List your project's anticipated outcomes in the following table.

Generally outcomes can be framed as an increase or decrease in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation, (these are generally **immediate** or short-term outcomes)
- Actions, behaviour, change in policy (these are generally **intermediate** or medium term outcomes)
- Social, financial, environmental, physical conditions (these are generally **long-term** outcomes)

Anticipated Outcomes	Estimated Impact
Outcomes are the changes that you expect to	See description above
occur as a result of your initiative. See information above.	
Evaluation	
How do you know that you're achieving w	what you have set out to do? *

Budget

* indicates a required field

The budget has two sections: Cash Budget and In-Kind Contribution.

How are you gathering information to determine this? *

- Cash Budget is where you provide details of any items you will need to pay with money for the proposed project (Expenditure) and how you source money (Income).
- **In-Kind Contribution** is where you provide a contribution of a good or a service other than money. Some examples include: voluntary labour (for example, painting work), donated goods (for example, kitchen equipment) donated services (for example, professional advice from an architect).

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Co-Contribution Requirements

You must **match** (\$1:\$1) the amount of funding being sought either via financial contribution and/or through in-kind contributions.

In-Kind Contribution

Golden Plains Shire Council uses the following criteria/rates for in-kind volunteer support:

- Volunteer Unskilled Labour is calculated at \$30 per hour per volunteer.
- Volunteer Skilled Labour is calculated at \$45 per hour per volunteer or reasonable commercial rate with evidence.
- An example of calculating in-kind volunteer contribution: 3 unskilled volunteers for 2 hours: 3 volunteers x 2 hours at \$30 per hour = \$180.
- You can have multiple entries for in-kind volunteer support e.g. volunteers in the development phase, volunteers in the implementation phase, volunteers in the evaluation/close phase of your project.

IMPORTANT:

•

- **PLEASE DO NOT ADD COMMAS** to figures (e.g. type \$1000 not \$1,000) in this budget section.
- Grants up to \$10,000 are available.
- Quotes or evidence to support the budget for any individual expenditure over \$250.

If you need assistance competing your budget, please contact Council's Community Development & Grants Officer on 5220 7111 or email: communitygrants@gplains.vic.gov.au.

Is your organisation (or your auspice organisation) GST registered? *

○ Yes

O No

If you are GST registered then the budget will be excl GST. If you are not GST registered then the budget will be incl GST.

If you (or your auspice organisation) are GST registered then your budget (including Grant Amount Requested) will be **exclusive of GST**. We will add GST portion when we prepare your invoice.

For example, if you are requesting \$5,000 + GST then please include **\$5,000** in the Grant Amount Requested.

Please click here to view the ATO website for further information on GST.

If you (or your auspice organisation) are non-GST registered then your budget (including Grant Amount Requested) will be **inclusive GST**.

For example, if you are requesting \$5,000 + GST (\$500) then please include **\$5,500** in the Grant Amount Requested.

Please click here to view the ATO website for further information on GST.

Form Preview

Grant Amount Requested

If you are **GST registered** then the budget will be exclusive of GST. For example, if the sum of quotes is \$1000 + GST \$100 then your grant amount requested is \$1000.

If you are **not GST registered** then the budget will be inclusive of GST. For example, if the sum of quotes is \$1100 including GST then your grant amount requested is \$1100.

PLEASE DO NOT ADD COMMAS to figures (e.g. type \$1000 not \$1,000) in this budget section.

Total Amount Requested	\$	
*	What is the total financia application?	I support you are requesting in this

Leveraging this Community Strengthening Grants Program

If you are planning to utilise our Community Strengthening Grants program as part of an application to other funding programs, please contact Council's Community Grants team prior to submission of this application.

Application granted funds for leveraging to other funding programs will not receive the allocated Community Strengthening Grants funding until the additional funding is approved and evidence provided to the Community Grants team.

Income (Cash)

IMPORTANT: This is where you provide details of how you source money to deliver your proposed project including this grant funding and other funding you may have secured for the project.

Income Description Confirmed Funding? Income Amount (\$) Notes

	Confirmed Unconfirmed Not Applicable	\$	
		\$	
		\$	
Please include '0' in income amount if there is no cash contribution or in-kind contribution		Must be a dollar amount.	

Expenditure (Cash)

IMPORTANT:

• Applicant must have a level of public liability insurance appropriate to cover the project. If **increased/ additional** insurance is required to your specific project, it can form part of the budget and can be added as an expenditure budget item here.

Form Preview

- All line items in your expenditure budget that are \$250 or above you must supply a
 quote.
- Please ensure that you include costs relating to any design, permits (e.g. building permits) or consultation in your expenditure list below.

Expenditure Description	Expenditure (\$)	AmountIncome Source Notes
	\$	This Council Grant Cash Contribution incl. other grants In-Kind Contribution
	\$	
	\$	
	\$	

Cash Budget Totals

Your budget **MUST** balance (expenditure and income must be the same totals).

Total Income Amount	Total Expenditure Amount	Income - Expenditure
\$	\$	
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.

In-Kind Contribution

In-Kind Contribution is a contribution of a good or a service other than money. Some examples include: voluntary labour (for example, painting work) donated goods (for example, kitchen equipment) donated services (for example, professional advice from an architect).

Golden Plains Shire Council uses the following cirteria/rates for in-kind volunteer support:

- Volunteer Unskilled Labour is calculated at \$30 per hour per volunteer.
- Volunteer Skilled Labour is calculated at \$45 per hour (or reasonable commercial rate with evidence) per volunteer.
- An example of calculating in-kind volunteer contribution: 3 unskilled volunteers for 2 hours: 3 volunteers x 2 hours at \$30 per hour = \$180.00.
- You can have multiple entries for in-kind volunteer support e.g. volunteers in the development phase, volunteers in the implementation phase, volunteers in the evaluation/close phase of your project.

In-Kind Contribution Description	Estimated Value		
	Must be a dollar amount.		

Please upload evidence of commercial rate (if reasonable commercial rate is used for In-Kind Contribution calculation).

Form Preview

Attach a file:
Total In-Kind Contribution Value
This number/amount is calculated.
Co-Contribution
Applicant must match (\$1:\$1) the amount of funding being sought either via financial contribution or through in-kind contributions.
Co-Contribution Amount
This number/amount is calculated.
Total Project Cost
Cash Income/Expenditure + In-Kind Contribution
This number/amount is calculated. What is the total budgeted cost (dollars) of your project?
Why do you need Golden Plains Shire Council's financial support to deliver this project? *
Please state your organisations current bank balance. *
\$ Must be a dollar amount.
Quotes
All line items in your expenditure budget that are \$250 or above you must supply a quote.
Please attach quotes for those expenditure (cost) items over \$250. Attach a file:

Additional Application Details

Form Preview

Position *

Is there anything else you wo	uld like t	o add in support	of your application?
Include in this section information ab volunteers time/expertise, equipmen and how you will complete this project also about any past work that may do Provide links to further explanatory in	t, facilities, ct/program emonstrate	pro bono or in-kind co within the proposed to your organisation's co	ontributions, advocacy, etc.) imelines. Provide information
	Supporti	ng Documents	
		load any other doc of relevant strategi	uments related to this project c documents.
Upload files	Attach a f	ile:	
	or		
Provide web link:			
	Must be a	URL	
Certification and Feedba	ack		
* indicates a required field			
Certification			
This section must be completed the applicant organisation (may tapplication form).			
I certify that to the best of my application are true and corre organisation is approved for tand conditions of the grant as	ct, and I his grant	understand that , we will be requ	if the applicant ired to accept the terms
I agree *	○ Yes		○ No
Name of authorised person *	Title	First Name	Last Name
	Must be a authorised		board member or appropriately

Position held in applicant organisation (e.g. CEO, Treasurer)

2024 Creative Community Grants Form Preview

Contact phone number *		
	Must be an Australian phone number. We may contact you to verify that this application is author by the applicant organisation	ised
Contact Email *	Must be an email address.	
Date *	Must be a date	
Applicant Feedback		
	oplication process. Before you review your application take a few moments to provide some feedback.	and
Please indicate how you found ○ Very easy ○ Easy	d the online application process: O Neutral O Difficult O Very difficult	ult
If you answer 'Difficult' or 'Vei information?	ry difficult', can you please provide further	
How many minutes in total did	d it take you to complete this application? *	
Estimate in minutes i.e. 1 hour = 60		
	uggestions about any improvements and/or rocess/form that you think we need to consider.	
Where did you hear about this ☐ Social Media ☐ Council Web Gazette ☐ Council officers/staff Other	ppage □ Community □ Newsletters □ GP Times	
Would you like to be sent any funding opportunities ? * O Yes O No	useful information on workshops, training or ot	her