

# **APPLICATION FORM**

## Good 4 Locals General Giving Grants Program

Good 4 Locals is local above all else.

The Good 4 Locals Foundation has been established to further capture the Foodland brand commitment of giving back to the community that is has operated within for over 60 years.

In keeping with the Good 4 Locals values, the Foundation will provide funding support to charities that aim to improve and protect the quality of life of South Australians in one the following priority areas:

- o Social Services (Mental Health/Homelessness)
- o Community projects

Applicants can apply for any amount of funding up to \$50,000 incl. GST.

#### 2025 Important Dates - Round 1

- Applications open: Monday 19 May 2025
- Applications close: Friday 13 June 2025
- Applications assessed: Tuesday 25 June 2025
- Recipients notified: 7 July 2025

#### Essential criteria

To ensure sponsorship applications are treated equally, only applications that meet all of the following criteria will be considered:

- The project is based within South Australia
- The application is from a not-for-profit or community organisation that provides a service or other benefits to the community
- There is a clear link between the project and Good 4 Locals priority areas
- There is the opportunity for a high degree of visibility within the local or wider community, providing positive exposure for Good 4 Locals
- Good 4 Locals receives measurable benefit as a direct result of the sponsorship

#### Assessment Process and Feedback

Good 4 Locals Foundation Grants will go through multiple rounds of assessment. All applications are initially checked to ensure that they meet the eligibility criteria for a funding arrangement and that the application is appropriate.

Completed applications will be assessed by a selection panel within ten working days of each round closing.

The Good 4 Locals Foundation Board and subject matter experts will then assess applications and create a short list. Assessment of grants will focus on:

• Expected outcome of and impact of the initiative



- Long term impacts of the initiative
- Need for the initiative within the community
- Eligibility of the charity
- Reputation of the charity and ability to deliver on the initiative
- Ability to show planned use of funds
- Ability to measure and report on outcomes of the initiative
- Alignment with the goals and values of the Good 4 Locals Foundation
- Alignment with the chosen charity
- Potential for success of the initiative
- Innovation

Successful applicants will be notified using the details provided. In addition, successful applicants will be provided with a tax invoice form for completion (if registered for GST).

Unsuccessful applicants will be notified by email within four weeks of each round closing. Due to the high volume of applications, individual feedback is not possible.

Good 4 Locals decision is final and not all applications will be deemed successful, even when application guidelines have been met in full.

#### Agreement with Good 4 Locals

Successful applicants must complete their project, program, or activity within six months of being awarded funding.

#### Publicity

Successful applicants must be prepared in matters such as publicity, as requested by Good 4 Locals.

For all queries on your application, please contact <u>marketing@foodlandsa.com.au</u>

Once your application form has been completed, please send to marketing@foodlandsa.com.au



# Application Form

Organisation name:
Contact person: (required)
First name:
Last name:
Position:
Contact number:
Mobile number:
Email (required):
Address:
Website:
ABN: (required)
Brief description of your project/services (100 words) (required)

Details of the Entity Applying for Funding				
Organisation name: (required)				
ABN: (required)				
Entity type:				
(what type of entity is the applicant) Business Register website for further		sure about the legal en	ntity status, refer to the Australian	
GST registered		Charity		
For profit		Withholding tax e	exempt	
Is the organisation not-for-profit?				
What is the organisation's registered business address? (the business address must be completed in full and not be a PO Box) Address:				
Suburb:	State:		Postcode:	
Main telephone:				
Main email address:				
Confirm email address:				



#### Please nominate two contact persons for the legal entity for this application

Note. These contacts must have authority to act on behalf of the organisation. These are the people who will be contacted for all matters regarding the application.

Contact Person 1	
Title:	
First name:	
Last name:	
Position:	
Contact number:	
Mobile number:	
Email address:	
Confirm email address:	

Contact Person 2
Title:
First name:
Last name:
Position:
Contact number:
Mobile number:
Email address:
Confirm email address:

Nominated Bank Account Details for receipt of payment		
BSB Number (must be 6 numbers)		
Account Number (must be 2 to 9 numbers)		
Account Name		
(as it appears on the bank statement)		

## About the Project/Activity

Provide a short title for the project / activity (approximately 10 words)

**Provide a detailed description of your project / activity (i.e. what you plan to do)** *You must respond to this question below (approximately 300 words)* 



## Alignment with Objectives and Outcomes

Describe how the project / activity contributes to the objectives and outcomes of the selected Good 4 Locals priority areas. You should consider how the project / activity may support the selected priority area. You should also provide measures of success in your application.

You must demonstrate this through identifying:

- How the initiative proposed in your organisation's application aligns with the Good 4 Locals objectives and outcomes
- What is the need for this initiative in the community
- What is the expected outcome and impact on the community
- How the proposed initiative will achieve value for money through the use of funds
- Potential for success of the initiative

Yo	u must	respond	to	this	question	bel	OW	

What is the physical address where the project / activity will take place?

Please provide the actual physical address where the project / activity will be most active. This address may be different to the organisations business address. If the grant activity will be undertaken in an environmental location, this address must be provided. For digital projects, use office location.

Street number, name, and type

Suburb	State	Postcode		
Main telephone				
Main email address				
Confirm email address				
What is the anticipated commencement date of the project / activity?				
What is the anticipated completion date of the project / activity?				



#### **Financial Information**

What is the total amount of funding (GST excl) requested in this application for the project / activity?

Please enter the total amount of funding requested for this project / activity.

Please provide a detailed breakdown of each item contained within the request.

What is the total cost of the project / activity?

Please include all costs for the project including those not covered by the funding requested in this application.

Once completed, please submit your application via email to: marketing@foodlandsa.com.au



Declaration

Are there any conflicts of interest that may occur from submitting this application? Yes/No

Please read and complete the following declaration.

This declaration must be completed by an authorised representative of the applicant (or, if this application is a joint application, authorised representative of the lead organisation. The authorised representative should be a person who is legally empowered to enter into contracts and commitments on behalf of the applicant.

I declare that:

- The information contained in this form is true and correct.
- I have read, understood, and agree to abide by the Guidelines.
- I have read, understood, and agree to the Grant Terms and Conditions, should this Application be successful.
- If and where any personal details of a third party are included, the third party has been made aware of, and given their permission for those details to appear in this Application.
- I give consent to Good 4 Locals to make public the details of the Applicant and the funding received, should this Application be successful.

I understand and agree to the declaration above.

I acknowledge that giving false or misleading information to the Good 4 Locals General Giving Program is a serious criminal offence.

I confirm the information provided in this application is true and correct.

Full name of Authorised Officer	
Position of Authorised Officer	
Signature of Authorised Officer	
Date	