**GUIDELINES**

1. **How to Apply**

An application is to be made in writing to Pilbara Meta Maya Regional Aboriginal Corporation (PMMRAC) by submitting a written application to:

**Attention: Chief Executive Officer**

Pilbara Meta Maya Regional Aboriginal Corporation

PO Box 2680

South Hedland WA 6722

1. **General Selection Criteria**
   * + - Discreet Aboriginal Communities located in the Pilbara region (refer to Item 3).
       - Town Based Reserves located in the Pilbara region.
2. **Eligibility**

The following communities are eligible to make an application to the PMMRAC Community Project Grants Program:

|  |  |  |
| --- | --- | --- |
| **Barrel Wells** | **Kunawarritji** | **Punmu** |
| **Bindi Bindi** | **Kutkabubba** | **Tkalka Boorda** |
| **Burringurrah** | **Marta Marta** | **Wakathuni** |
| **Cheeditha** | **Mingalatharndo** | **Wandanooka** |
| **Innawonga** | **Mirtunkurra** | **Warralong** |
| **Irrungadji** | **Ngurrawana** | **Weymul** |
| **Jigalong** | **Parnngurr** | **Windidda** |
| **Jinparinya** | **Parnpajinya** | **Yandeyarra** |
| **Junduru** | **Pia Wadjari** | **Youngaleena** |
| **Kiwirrkurra** | **Punju Njamal** | **Yulga Jinna** |
| **Koombana** |  |  |

1. **Other Requirements**
   * + - The maximum that a community can receive in a financial year is $5,000.00.
       - At the end of the third quarter of the financial year a review of the Community Project Grant Program will be undertaken to determine the expenditure flow of the program. If unexpended funds are identified, a community project grant recipient may apply for a further $5000.00 towards a new project.
       - Applicant to complete the PMMRAC Application for Community Project Grant Funding.
       - Provide supporting documentation.
       - Scope of works to be completed by the applicant.
       - Receipts of purchase must be provided to PMMRAC showing evidence of purchases.
2. **Program**
   * + - The PMMRAC Community Project Grant Program has been established to support communities to undertake community projects that will improve the living areas of the community.
       - The PMMRAC Community Project Grant Program is not to replace existing Government program responsibilities delivered through existing contracts.
3. **Outcome**
   * + - The Community must acknowledge the contribution made by PMMRAC to the community.
       - Address environmental and community priorities within the community.
4. **Objectives**
   * + - Increase the community capacity to delivery services and activities.
       - Community managing and control their community priorities.
5. **What this Program will Fund**
   * + - Light handheld tools and equipment.
       - Goods and services that will support a community activity.
6. **Assessment Team**
   * + - PMMRAC will assess each application to ensure they meet the eligibility of the program.
       - The application will be presented to the Directors for approval.
7. **Acquittal**
   * + - The applicant is responsible for providing all requested documentation to PMMRAC within the specified timeframe.
       - PMMRAC will review documentation to ensure funding has been spent on items specified in the initial application.
       - Any receipts that are found not be related to the project will be invoiced to the applicant who will be solely responsible to repay PMMRAC.
       - Any fraudulent activity will result in future applications from the community being denied.
       - PMMRAC will issue a letter to the applicant advising the outcome of the acquittal within 90 days of the project ending (timeframe dependant on required documentation being submitted on time).
8. **Evaluation**

Written correspondence must be sent to PMMRAC within 30 days of acquitting the funds indicating the outcome benefits from the PMMRAC Community Project Grant Funding.

**APPLICATION**

**General Project Information**

|  |  |
| --- | --- |
| **Project title:** |  |
| **Estimated start date:** |  |
| **Estimated finish date:** |  |
| **Funds requested from PMMRAC Community Project Grant (excluding GST):** |  |

**Applicant Details**

|  |  |
| --- | --- |
| **Community name:** |  |
| **Authorising officer:** |  |
| **Position title:**  **(Board Member, Director, etc)** |  |
| **Contact person:** |  |
| **Postal address:** |  |
| **Contact telephone:** |  |
| **Contact mobile:** |  |
| **Contact email address:** |  |

**Has your community received grant funding in this financial year from PMMRAC?**

|  |
| --- |
| No |
| Yes |
| If yes, please provide details: |
|  |
|  |
|  |

**Is the community contributing funding to this project?**

|  |
| --- |
| No |
| Yes |
| If yes, please provide details: |
|  |
|  |
|  |

**Project Description**

**What do you aim to achieve with the funds?**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**Describe the benefits/outcomes you are hoping to achieve with funding and how they will be measured:**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**Why does your community need this funding?**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

**Are there any implications of funding not being provided?**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**Details of project items to be funded by the grant:**

*(Please attach quotes for all budget line items to justify funding requests wherever possible)*

|  |  |  |
| --- | --- | --- |
| **Project Item** | **Total $ (ex GST)** | **Quote Attached** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL:** | **$** |  |

**Application Checklist**

By submitting this application, I acknowledge:

|  |  |
| --- | --- |
|  | Pilbara Meta Maya Regional Aboriginal Corporation does not accept faxed applications. |
|  | Information provided in this application is to the best of my knowledge, accurate and complete. |
|  | This application is authorised by my community and includes the relevant CEO/Chair signature. |
|  | I have read the Guidelines and acknowledge the eligibility criteria for funding. |
|  | Pilbara Meta Maya Regional Aboriginal Corporation may request additional information from applicants. |
|  | Pilbara Meta Maya Regional Aboriginal Corporation will be notified of any change to the information supplied and any other information or circumstances arising that may affect this application. |
|  | This application includes quotes for all budget line items to justify funding request. |

**Declaration**

*The declaration is to be signed by the Authorising Officer specified in the Applicant details.*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I, |  | | | |  |  | | | |
|  | **NAME** | | | |  | **TITLE** | | | |
| of |  | | | | | | | | |
|  | **COMMUNITY NAME** | | | | | | | | |
|  | | | | | | | | | |
| do hereby declare that all the information supplied in this application form for Pilbara Meta Maya Regional Aboriginal Corporation Community Project Grant Funding is, to the best of my knowledge, accurate and complete; that I have read and accept the requirements of the Guidelines, and that the Pilbara Meta Maya Regional Aboriginal Corporation will be notified of any change to the information supplied and any other information or circumstances arising that may affect this application. | | | | | | | | | |
|  | | | | | | | | | |
| Dated: | |  |  |  | | |  |  |
|  | | **Day** |  | **Month** | | |  | **Year** |