



AMANDA FLYNN
FOUNDATION

giving life to others is her legacy

Amanda Flynn Foundation

Commercial Office 3,

246 Arthur Street,

Newstead QLD 4006

grants@amandaflynnfoundation.com.au

amandaflynnfoundation.com.au

AFF Grant – Application form

1. Details of applying organisation

Name of Organisation

Australian Business Number (ABN)*

Organisation Head (Name & Title)

Website

Item 1 Deductible Gift Recipient (DGR) status?***

*Only organisations endorsed by the ATO as an
Item 1 Deductible Gift Recipient can apply to the
Amanda Flynn Foundation.*

Endorsed under which DGR 1 Category?***

ie. 4.1.1 Public Benevolent Institution

Is the entity an ITEC or TCC?

Is the entity registers for GST?

* The ABN provided will be used to look up the following information from the Australian Business Register.

** Please attach scanned copies of the organisation's ATO Endorsements (ITEC / TCC and DGR)

2. Contact details for application information

Please provide contact details for the individual who is responsible for answering questions regarding this application.

Name

Position held

Work telephone

Mobile

Email

3. Project details

Title of Project

Amount of total project budget

\$

Total amount requested of Amanda Flynn Foundation

\$

Project period (relevant to this request)

Please provide a start and finish date, including enough time to allow for evaluation after the project activities have finished.

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4. Organisation details

Background

Please provide a brief outline of your organisation including: Length of establishment; details of the organisation's mandate (including social context and geographical reach); how the organisation can demonstrate competence in the proposed initiative / program area).

Governance Statement

Please provide the full name of the entity, the type of entity (ie. a company limited by guarantee etc) and its governance body (ie, board of directors).

Please comment on the way the entity approaches the important issues of governance. (ie. annual board review, governance policies that are in place, comment on succession planning).

Outline briefly how the governance body works with management.

People

Please complete the table below briefly outlining each member's background, skills and experience, as they relate to the balance of skills contributing to the whole governance body.

Name & Position Held

Qualifications background, skills, notable achievements (if relevant)

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5. Project details

Please provide a brief outline description of the Project and its intent.

What need/s does this project address and who will the beneficiaries be (direct and indirect)?

What consultation / research has occurred to demonstrate that this need exists within the target group/s and/or community/ communities selected for this Project?

Why will this particular project address this need/s?

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5. Project details continued

In the table below please detail the outcomes you seek from these activities and how you will determine whether they have been achieved (KPIs)?

Outcomes anticipated

Key performance indicators (KPIs)

What is the timeline involved in the execution of the Project, including key milestones and activities?

Which relevant stakeholders were consulted about the Project and how can this be demonstrated?

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5. Project details continued

Outcomes and evaluation

Please outline how this Project will address this need; how the benefits will be demonstrated within the target community (anticipated outcomes) and how the results will be measured and evaluated.

Please outline the benchmarks which will be used to determine the level of success of the Project.

If the Project has been undertaken previously, please indicate the relevant considerations for the continuation of the initiative and why it is likely to be successful on an ongoing (short or long term) basis.

Please provide details of any external evaluation that will take place.

Collaboration

Please indicate if your organisation intends to collaborate with other entities or stakeholders in the implementation of the Project, and if so, who these collaborative stakeholders will be.

Checklist

Please ensure **all** answer fields are completed and you have attached the requested supporting document as part of your application including your proposed Project Budget. The Budget must be submitted for qualification.

Please note: It is a condition of the grant that management fees and auspicings fees will not exceed 5% of the grant awarded. The Amanda Flynn Foundation reserves the right set the amount of the management and auspicings fees to be applied to the grant, all fees must be identified in the Grant Application budget.

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