

## PROJECT IDEA APPLICATION FORM

Project Name:					
Category:	Community Event	Volunteering Support	Skills/Training		
What is your idea?					
How do you know this is needed?					

How many participants do you expect? Will these be tenants or applicants?

How will this benefit social housing tenants/applicants in your community? How will you know that your project has worked?

Will you be collaborating with any other agencies? If so, which one/s?

What will be your contribution to the project? For example: venue, staff time volunteers, advertising etc.



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Funding: How much money do you estimate you will need to complete this project? What will you use the money for in general terms? Please provide a short budget.

Item	Cost
Total	

Any Additional Information?

Yes! We will complete this project and are willing to share our successes.

We will seek consent from participants to take photographs of them for use in Community Industry Group promotional material and will provide a copy of this consent to the Community Industry Group in writing.

Name:	Organisation:	
Position:	ABN:	
Address:	Telephone:	
Email:	I learned abo	ut the TPRS Local Partnership Project through:
Signature:	Date:	

Please submit your completed application via email to mbreuker@cigroup.org.au