### Welcome

\* indicates a required field

#### Introduction

Before completing this application form, you should have read the Community Grant guidelines.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you need more help using this form, download the <u>Help Guide for Applicants</u> or check out <u>SmartyGrants applicant FAQs.</u>

Should you require assistance with completing your application, contact the grants officer on 03 6238 2132 or grants@hobartcity.com.au.

If you do contact us throughout the application process, please quote the application number below:

Λ	nn	lica	tio	n N	lun	he	r
н	มม	IICa	ıLIQ	71 I IN	ıun	IDE	: 1

This field is read only.

The identification number or code for this submission.

### **Privacy notice**

We pledge to respect and uphold your rights to privacy protection under the <u>Australian Privacy Principles</u> (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012.* To view our privacy statement, go to <a href="https://www.hobartcity.com.au/privacy">https://www.hobartcity.com.au/privacy</a>.

### **Commercial in confidence**

The information you provide as part of your grant application will be treated as commercial in confidence. This information will be used for the purposes of assessing your grant application and, if successful, it will also be used in the management of your grant agreement. The Council will not disclose this information unless required or permitted by law.

### Eligibility

Applications for the Community Grant will need to demonstrate that the request for support:

- is for an activity that addresses a need or interest in the Hobart community
- aligns with at least one of the priority areas from the City of Hobart's Community Inclusion and Equity Framework, <u>Hobart: A City for All</u>

- has outcomes which are delivered in the City of Hobart local government area
- if the activity is part of an ongoing program, the application must demonstrate how the City's support will substantially increase the impact of the ongoing program.

Applications are ineligible if the request for support:

- is for an activity that is part of a larger festival or event which has received a grant or sponsorship from the City of Hobart
- is for commercial purposes, has the potential to make a significant profit or the activity is self-sustaining
- is part of the ongoing administration or operational costs of the applicant
- in the case of registered schools and training organisations, includes costs associated with the employment of teaching or support staff and/or the delivery of the curriculum.

### Applicants must have:

• not received other funding from the City for the same activity this financial year

I confirm I have read and understood the guidelines and eligibility criteria, and

- have fulfilled the conditions of a previous City of Hobart grant by the due date and not have overdue debts to the City
- have adequate public liability insurance.

this application meets all grant requ ○ Yes	irements. *
What type of applicant are you?  Not-for-profit organisation	<ul> <li>Registered school or training organisation</li> </ul>
Registered charity	<ul><li>Social enterprise</li></ul>
<ul> <li>Incorporated association</li> </ul>	<ul> <li>An eligible government entity (Tasmanian Museum and Art Gallery or the Royal Tasmanian Botanical Gardens)</li> </ul>
<ul><li>Group (not incorporated)</li></ul>	, , , , , , , , , , , , , , , , , , ,
Have you, your group or your organi Hobart before? *	sation received funding from the City of
○ Yes	○ No
Conflict of interest	

Applicants must disclose any reasonably identifiable perceived or actual conflicts of interest when submitting their application to the City of Hobart. You are required to declare any known circumstances that may create a conflict, whether actual, potential, pecuniary or perceived conflict of interests. Failure to disclose may result in disqualification of your application.

### The applicant applying for funding declares: \*

- O Yes I do have a potential or actual conflict of interest
- O No I do not have a potential or actual conflict of interest

Please provide details of any known conflicts of interest, whether financial or otherwise.

Contact details  * indicates a required field  Applicant details		
Applicant *	Organisation Name	
	Name of the organisation, group name.)	or entity. (Not the individuals
Street Address *	Address	
	Address Line 1, Suburb/Town, St Country are required. Country m	
Postal Address	Address	
Website	Must be a URL.	
What is the purpose of your organisation/ group? *		
group:	Word count: Must be no more than 50 words. Please provide a short statemen reason for being and its activitie reports, media statements and e to this grant.	t describing the applicant's
Does your organisation/ group have an ABN? *	○ Yes	○ No
ABN details		
Applicant 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 Bus	siness Regis	ter		
ABN	J			
Entity name				
ABN status				
Entity type				
Goods & Services Tax (GST)				
DGR Endorsed				
ATO Charity Type	More infor	mation		
ACNC Registration				
Tax Concessions				
Main business location				
Must be an ABN.				
with your application, otherwise the form from the ATO website.  Please upload completed Sta Attach a file:			·	thheld. Downloa
Max 25mb per file uploaded				
Max 25mb per file uploaded  Contact person				
_	correspond	dence relating to th	nis applicati	on.
Contact person	correspond Title	dence relating to the First Name	nis applicati Last Name	
Contact person  This person will receive general	·			
Contact person  This person will receive general  Contact name *	·			
Contact person  This person will receive general  Contact name *	·			
Contact person  This person will receive general  Contact name *  Position *	·			
Contact person  This person will receive general  Contact name *	·			
Contact person  This person will receive general  Contact name *  Position *	Title		Last Name	
Contact person  This person will receive general  Contact name *  Position *  Phone number *	Title	First Name	Last Name	
Contact person  This person will receive general  Contact name *  Position *	Title  Must be a	First Name	Last Name	

Are you the head of the organisation applying for this grant?

Email address \*

Must be an email address.

 $\bigcirc$  No Formal correspondence relating to this application will be sent to the head of the organisation.

If successful, are you happy for your contact details to be provided to the media?	○ Yes	○ No		an provide ative contact s
Head of the organisation				
This person will receive formal co	orresponde	nce relating to thi	s application.	
Head of Organisation/ group	Title	First Name	Last Name	
Position				
Email address				
	Must be ar	n email address.		
Social enterprises				
Social enterprises are businesses communities, provide people acc				
The enterprise derives a substan more of their annual profits towa				ests 50% or
Please provide evidence that Attach a file:	the socia	l enterprise fits	this definition.	
Activity details				
* indicates a required field				
Key activity information				
Activity Name *				
Must be no more than EO characters				
Must be no more than 50 characters	•			
Activity start date *		Activity end date *		
Must be a date and between 1/1/202 31/12/2025. This is the date the activity is open t		31/12/2026.	ind between 1/1/202	25 and

attend or participate.

Describe your activity *	
Word count: Must be no more than 100 words	5.
In a succinct statement, phow this support will assis	lease describe what you are seeking funding for and st you. *
Must be no more than 100 words	5.
Has this activity been deli	
○ Yes	○ No
Where is the primary locat	tion(s) your activity will be delivered?
This can be the name of the venu	ue or an address.
Will there be an attendance  ○ No. There are no fees for attendance	ce fee? *  ○ Yes, there will be a mix of ○ Yes. The entire activity will ticketed and free activities for have fees to attend attendees
What are the primary area	as of focus for this project/program? *
want to be more specific. In this	selected. rea of the list – all have equal value. Only select sub-categories if you question we want to know about the field of work (e.g. arts, sport, people it will affect (e.g. young people, refugees)
Activities	
Tell us about the activities the row.	at will take place as part of this grant application. List one per

Activity	Location	Will this activity be delivered online?	Start date	End date	Fee to attend or participate	Explanatory notes
One per row. Add more rows if you want to list additional activities.	Where will your activity occur? Leave blank if location is unknown or not relevant.	Pick one option.	Leave blank if date is unknown or not relevant. Must be a date.	Leave blank if date is unknown or not relevant. Must be a date.	If there is no fee to participate please enter 0. If there is more than fee type, please	Add notes if you need to provide more context.

You can stipulate one location for each activity. If you have one activity taking place in multiple places, you can either list each location as a separate activity (e.g. Breakfast Club #1; Breakfast Club #2, with a specific location attached to each), or you can list one activity

with a generalised location (e.g. "Melbourne CBD").

		include this in the budget comments. Must be a dollar amount.	
O Yes - fully		\$	
O Yes - partially			
O No			
O Don't know			
O Yes - fully		\$	
O Yes - partially			
O No			
O Don't know			
O Yes - fully		\$	
O Yes - partially			
O No			
O Don't know			

### People

### \* indicates a required field

### Staff, volunteers and participants

The **participants** are people or groups who are actively involved in the delivery of the activity. These are performers, speakers, artists, creative practitioners, stallholders, staff, contractors and volunteers.

Number of paid staff *	Number of volunteers *	Number of other people participating in the activity *
Must be a number.	Must be a number.	
Total number of participants *	Mase se a Hamser.	Must be a number. This could be vendors or stallholders.
This number/amount is calculated.		

### Key staff for activity

Please identify the key people involved in the delivery of the activity. This should include any responsible officers such as chief wardens, site managers and COVID-19 safety officers.

Please include a summary of their experience as a single document as support material for the grant. The summary document can include hyperlinks to websites.

If additional lines are required please click the 'Add More' button on the bottom right side of the table.

Name	Role in the activity	Paid or Volunteer?	Do they have experience in delivering this type of activity?
Strategic Partners	5		
	group, organisation or . This can be charities, ors and donors.		
Are you working wit ○ Yes	h strategic partners	to deliver this activitory No	ty? *
Strategic Partner	Details		
Please provide corresp supporting material.	ondence confirming the	e strategic partners inv	olved in your activity as
Name	Role in the ac		ey providing cash or d support?
Name	Role in the ac		
Name	Role in the ac		
Name	Role in the ac		
Name  Audience	Role in the ac		
Audience Please identify the num	nber of people involved	in-kin	verall capacity of your
Audience  Please identify the nunactivity includes staff, of the audience is defined.	nber of people involved	in-kind	verall capacity of your
Audience  Please identify the nunactivity includes staff,  The audience is define holders, event attende	nber of people involved volunteers, artists, part ed as people who enga es, subscribers, custom	in your activity. The or icipants and attendees ge with the event progr ners and workshop part	verall capacity of your
Audience  Please identify the nunactivity includes staff,  The audience is define holders, event attende	nber of people involved volunteers, artists, part ed as people who enga- es, subscribers, custom ojected number of pe	in your activity. The or icipants and attendees ge with the event progr ners and workshop part	verall capacity of your . ram, such as ticket icipants.
Audience  Please identify the numactivity includes staff, of the audience is define holders, event attended.  Outline the total products of the audience is defined by the audience is	nber of people involved volunteers, artists, part ed as people who enga- es, subscribers, custom ojected number of pe	in-kind in-kind in your activity. The or icipants and attendees ge with the event programmers and workshop part ople that will engage	verall capacity of your  ram, such as ticket icipants.

What method did you use?

### Who are the expected primary beneficiaries of this project/program? \*

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of the audience for this activity. If your initiative is open to everyone, choose the first item, 'Universal – no particularly targeted beneficiaries'

### Activity risk management

\* indicates a required field

### Public liability insurance

Public liability insurance covers a person, a business, an event, a contractor – even a community building – for costs from legal action if they are found liable for death or injury, loss or damage of property, or economic loss resulting from their negligence.

Activities seeking support through this grant are required to have public liability insurance

If your activity is being held in a City-owned venue or open space and you do not have public liability insurance, you can purchase community public liability insurance from the City of Hobart. This costs \$27 including GST. For more information, please speak to the officer about your venue or open space booking.

	3	
<b>Do you have public liabilit</b> ○ Yes	y insurance? *	<ul> <li>The grant includes costs to purchase public liability insurance</li> </ul>
Please upload the public li Attach a file:	ability insurance c	ertificate
An updated certificate may be restart and end dates.	quested closer to the d	ate to ensure the insurance covers the activity

### City outcomes

\* indicates a required field

### Community benefit

What community need or interest is this activity addressing	<b>j?</b>
Word count: Must be no more than 150 words.	

Describe the specific issue or need you want to address.

How does this activity benefit the community?
Word count:
Must be no more than 150 words.  Describe up to three things you want the project to achieve in terms of benefits for participants and/or others.
What community support do you have for this activity and how will they be involved? *
Word count:
Must be no more than 150 words. This may include community based organisations who will participate and/or benefit from the project. Please provide evidence of this support.
Strategic alignment
Hobart: A city for all, the City of Hobart's Community Inclusion and Equity Framework, outlines the City's role in creating a city for all and provides a framework for action.
The Community Quick Response Grant supports activities that align with at least on the priority areas identified in the framework.
Which of the following priority areas does your activity align with? *
☐ Truth and reconciliation
<ul><li>□ Participation and access</li><li>□ Wellbeing and knowledge</li></ul>
□ Safety and resilience
At least 1 choice must be selected.
In dot points, briefly describe how your project aligns to the selection(s) above. *
Word count:
Must be no more than 150 words.  Describe three things you want the activity to achieve in terms of benefits for participants and/or

### Tasmanian Aboriginal culture

Hobart is a place that recognises and celebrates Tasmanian Aboriginal people, history and culture, working together towards shared goals. The <u>City of Hobart's Aboriginal Commitment</u> and <u>Action Plan</u> sets out the City's commitment and approach to working with Aboriginal people.

We encourage our grant recipients to acknowledge and engage with The Tasmanian Aboriginal community in the activities we support.

**Acknowledgement of Country and/or Welcome to Country** Both a Welcome to Country and an Acknowledgement of Country recognise the continuing connection Aboriginal

people have to their land. Traditionally used as a way to grant permission to cross country boundaries, these remain important symbolic gestures today.

Some Aboriginal people will feel uncomfortable attending an event where no Welcome or Acknowledgement is offered and so it is important to consider whether providing one is appropriate.

These ceremonies and statements offer a valuable moment to reflect and consider the 40 000+ years of history and culture in this place and to pay respect to Aboriginal people.

### Select formalities that the activity will include in relation to Tasmania's Aboriginal heritage. \*

- Welcome to Country
- Acknowledgement of Country
- Both an Acknowledgement of Country and a Welcome to Country
- O The activity will not have any form of official formalities

### Outline any additional Aboriginal cultural programming that will involve Aboriginal history and culture.

It is important to demonstrate consultation with the Tasmanian Aboriginal community. Please include letters confirming support or involvement as support material. For more information, please visit the City's <u>Aboriginal Programs webpage</u> or contact us.

### Accessibility

Regardless of background, gender, identity or life situation, the City believes our community should have the opportunity to connect, share and express one's identity.

One of the fundamental principles of the grants program is to encourage all of our community with the opportunity to be involved or attend the activities we support.

Applicants should endeavour to ensure that their activity will be accessible for people of all abilities. For more information visit our Equal Access webpage.

Please keep the costs associated with delivering an added services in mind when developing your budget.

### Will the activity include any of the following \*

☐ Venue: entrance is step-free and a lift is available if the activity is not on the ground
floor
☐ Invitation: is in an accessible format and asks participants "Please inform us of any
dietary and/or access requirements"
☐ Wayfinding and signage: include an access map denoting paths of travel, location of
accessible toilets, prominent signage, green areas for assistive animals (to toilet during the
activity)
☐ Inclusiveness: book Auslan interpreters, provide captions on videos, provide viewing
platforms, train staff in disability awareness
☐ Space arrangements: allow sufficient space between aisles and leave gaps in seating for
people using mobility aids
☐ Video recording or streaming online
☐ Activity or event signage in languages other than English
Applicants should endeavour to ensure that their activity will be accessible for people of all abilities.
For more information visit our Equal Access webpage.

participating?				
Word count: Must be no more than 150 words.				
Sustainability				
All activities funded through the grants program must commit to reducing their environmental impact and improving waste management.				
Applicants are encouraged to consider their commitment to sustainable practices as part of the activity, including encouraging the use of public transport to and from the activity, providing recycling facilities, reducing single-use plastics, reducing printed collateral, completing a waste audit report and establishing improvement targets.				
The Single-use plastics by-law is enforceable from 1 July 2021. To find out how this may affect your activity, please visit our $\underline{\text{webpage}}$ .				
The <u>City of Hobart Waste Management Strategy 2015 - 2030</u> encourages all entities affiliated with the City of Hobart to support our endeavour to achieve <b>zero waste</b> to landfills by 2030.				
As a minimum, grant recipients are required to implement strategies that are aimed at:				
<ul> <li>Reducing waste in food services at events. This means that if food is sold or given away in disposable containers, only certified compostable containers and utensils may be provided to patrons.</li> <li>Reducing land-fill. This means that the use and distribution of plastic, "micro-bead" and glitter products (such as balloons, flags and promotional paraphernalia and plastic single-use water bottles) will not be undertaken as part of the activity.</li> </ul>				
Describe how the organisation will undertake waste management at your activity. $\boldsymbol{\ast}$				
This can include describing the potential environmental impacts of the activity and how you will manage and minimise waste creation at the activity.				
Marketing and documentation				
* indicates a required field				
Marketing is how you plan to promote and advertise the activity to a wider audience to drive attendance and engagement.				
Please identify how you will promote your activity? *  □ Applicant's website □ Newsletters □ Social media □ Direct communication with members				

☐ Paid social media	☐ Shared with like-mind groups or organisations
<ul><li>□ Printed material</li><li>□ Media (such as radio interviews)</li><li>□ Paid advertising</li><li>□ Event signage</li></ul>	☐ City of Hobart civic banners ☐ City of Hobart's festive lighting ☐ City of Hobart's gateway signage ☐ Other:
Briefly describe your marketing plan and primary audience. *	how you intend to connect with your
Word count: Must be no more than 150 words. Please note your marketing costs should be reflect marketing plan as support material.	ed in your budget. You are welcome to upload your
Marketing engagement	
Platform	URL
If additional lines are required please click the 'Add More' button on the bottom right side of the table.	Must be a URL.
Event website	
Facebook	
Instagram	
Newsletter	
Budget	
* indicates a required field	
Grant Request Details	
Total Funding Dogwood *	
Total Funding Request *  \$	
Must be a whole dollar amount (no cents) and betw What is the total financial support you are requesti	
Would you be open to accepting partial f ○ Yes	unding if it was offered? *  O No
Support from the City	
Does this activity have any involvement areas of the City of Hobart? Include any names. *	or association with any other program units, teams or individual staff members'

Please identify any income you are receiving from the City of Hobart for this activity in the income budget.

### Income Budget

Please describe all income items that are contributing to this activity. This includes your cash and in-kind contribution, as well as an estimate of any in-kind volunteer hours. (Volunteer hours can be valued at \$25 per hour for general volunteers and \$35 per hour for skilled volunteers).

Please note: All items listed in your budget should be exclusive of GST.

You are encouraged to upload a budget for the activity.

Income source	In-kind or cash	Confirmed or Not	Dollar Amount (\$)	Notes
City of Hobart (cash only)			\$	
			\$	
			\$	

### **Expenditure Budget**

All items listed in your Expenditure Budget should be GST exclusive. At least one item must be attributed to the requested support from the City of Hobart.

Please review the grant program overview document to understand what costs the City prefers to fund through a grant.

Expenditure Item	Funding Source	Dollar Amount (\$)	Notes
			Please outline how you came to this amount (for example the number of hours at the agreed upon rate.)
	City of Hobart	\$	
		\$	
		\$	
		\$	
		\$	

### **Budget Totals**

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

### **Budget Comments**

This is a space to make budget comments if you feel the assessors would benefit from further clarification of what you have written in your budget table above.

You may also attach a budget and other documents expanding on this section as supporting material.

<b>Upload the budget for the activity (option</b> Attach a file:	onal)	
Additional comments		

### **Support Material**

City of Hobart Booking Confirmation(s)

The City of Hobart no longer provides "in-kind" support for venue or equipment hires, fees or permits through this grant program.

If a council venue, space, equipment, permit or service is required for this activity you will need to make a tentative or confirmed booking.

Please upload correspondence from the appropriate booking officer, which should outline the dates, times and prices excluding GST. Please note that applicants who book Council equipment are responsible for any associated logistics including the cost of transport.

This should be discussed with the officer you make the booking through.

Any payment required for this activity will need to be made by the applicant directly to the relevant business unit of Council.

Item Description	Quoted fee (exclusive of GST)	Booking correspondence
Please quote the booking reference provided to you.	Must be a dollar amount.	
	\$	
	\$	

### **Application Support Material**

Support material must be directly relevant to the activity and complement rather than duplicate information already provided in this application.

A maximum of eight (8) items may be submitted.

Suggested support material may include:

- recent examples of your work and/or that of the key personnel (visual, aural or literary)
- evidence of community support (e.g. a letter of support from a community organisation that may directly or indirectly benefit from and that shows an understanding of your activity).

- summary of people involved in the activity
- other documentation or materials which will help the assessors understand your activity.

Acceptable formats, sizes and quantities:

- word documents, pdfs, jpgs and mp3 files
- maximum 5MB per file
- maximum of three URLs that directly link to relevant webpages uploaded in a document
- passwords must be provided for private links to YouTube, Vimeo etc

The following are not considered as support material and will not be assessed:

- Facebook pages
- · annual reports
- minutes of meetings (including AGMs)

### **Uploading Support Material**

Item Description	Upload your Files here	Website
		Must be a URL.

### Declaration and feedback

### \* indicates a required field

### Payment Information

If your request is approved, we can provide an electronic transfer of the funds into your account within fourteen (14) days of receiving your signed grant agreement.

If you would like the City of Hobart to issue the funds via an electronic transfer, we will need to generate a tax invoice on your behalf, this is called a Recipient Created Tax Invoice (RCTI).

Alternatively, you may wish to provide the City of Hobart with a tax invoice.

### Please nominate how you would like to receive payment. \*

- City of Hobart to generate a Recipient Created Tax Invoice (RCTI)
- Applicant to provide a tax invoice

### Payment via Recipient Created Tax Invoice

To allow us to process your payment as an electronic transfer based on the information provided in this application please agree to the following statement:

- The City of Hobart and the grant recipient declare that this agreement relates to the above grant.
- The City of Hobart can issue tax invoices in respect of this grant.
- The grant recipient will not issue tax invoices in respect of this grant.

Please provide the bank account details for the electronic transfer

- The City of Hobart acknowledges that it is registered for GST and that it will notify the grant recipient if it ceases to be registered.
- Acceptance of this RCTI constitutes acceptance of the terms of this written agreement.
- Both parties to this supply agree that they are parties to an RCTI agreement.
- The grantee must notify the City of Hobart within 21 days of receiving this document if the grant recipient does not wish to accept the proposed agreement.

### Please confirm the following

- O The Grantee acknowledges that it (or the auspice organisation) is registered for GST and that it will notify the City of Hobart if it ceases to be registered
- O The Grantee acknowledges that it (or the auspice organisation) is not registered for GST.

### Applicant bank details

Account Name		
BSB Number	Account Number	
Must be a valid Au	stralian bank account format.	
Declaration *		
	sed to submit this application	
•		cepted if it is submitted after the deadline as
•	City of Hobart website and/o	r if it does not have all the required information
and/or material	h - City - fill - h - at if h - a d - t - i	
	-	Is such as date(s) of the activity, the location
, ,	3 3	ified of the outcome of the application.
	•	ovided and the statements I have made in this
		e true to the best of my knowledge
9		rovide to the City of Hobart, and details of any
fundina vou rece	ive. mav be subiect to disclo	sure under the Right to Information Act 2009.

 $\hfill \Box$  If this application is approved, the applicant will be required to fulfil the conditions of the grant.

☐ I have declared any known circumstances that may create a conflict, whether actual,

☐ I acknowledge and understand that the level of funding offered to an activity (if any) is determined by the available budget and how well the activity supports the City to achieves

☐ If this application is approved, I consent to the City of Hobart publishing the name of the activity, the description of the activity, how the funding will be used and the amount of

potential or perceived conflict of interest, monetary or otherwise.

funding received on its website www.hobartcity.com.au

its goals and that this amount may differ from the amount requested.

$\hfill \square$ I consent to be contacted by to offered by the City of Hobart and			e to time ab	out other g	rants
Name of person completing this submission *					
Position *					
Date *	Must be a dat	e.			
Applicant feedback					
You are nearing the end of the application click the <b>SUBMIT</b> button please t					tion and
Please indicate how you found ○ Very easy ○ Easy	d the online		process: * Difficult	○ Very	difficult
How many minutes in total di  Must be a number. Estimate in minutes i.e. 1 hour = 60	d it take yo	u to complet	e this appl	ication?	
How did you find out about th  ☐ Advert in Mercury newspaper  ☐ Another Website (please tell u in the box below)		☐ Received a		n the City o	of Hobart
☐ Attended an information session presentation ☐ City of Hobart Website ☐ Hello Hobart ☐ I am a previous applicant ☐ Newspaper	on /	<ul><li>☐ Was told b</li><li>of Hobart</li><li>☐ Was told b</li><li>☐ Word of m</li><li>☐ Window sig</li><li>☐ Other:</li></ul>	y a previous outh	grant reci	pient
At least 1 choice must be selected.					
Please provide us with your s additions to the application p					der.