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|  | **Funding Application****Use this form to make a funding application to The Surveyor’s Trust**The application will need to describe what the funding is to be used for and who the beneficiaries are and demonstrate how the funded activity will benefit the members of the Surveyor’s Trust and the industry generally. |
| *When completed in a word processor such as Microsoft WORD the boxes in this form will expand to accommodate the information entered. Please be concise and try to limit the document to five pages in total. Add attachments if you believe they will assist.* |
| **The Applicant** |
| **Your name** |  |
| **Your telephone** |  |
| **Your E-mail** |  |
| **Your Postal address** |  |
| *Complete the next section if the application is on behalf of a legal entity that is not an individual person* |
| **Entity name** |  |
| **Type of entity** | Company / Partnership / Industry Association / University / Government |
| **Other** | (please specify): |
| **Phone** (if different) |  |
| **Physical address** |  |
|  |  |
| **Web site address** |  |
| **Your position** |  |
| *Please provide the following information as it applies* |
| **ACN Number, *or*** |  |
| **ABN Number** |  |
| **Registered for GST** | YES / NO |
| *Please provide a brief overview of the organisation, its members, purpose, objectives, and usual activities. Attach any documents you believe will assist.* |
| **Description** |  |
| *Please provide information about the funding being sought and its application, including timelines* |
| **The Funding** |
| **Amount sought (AUD$) (ex GST)** |  |
| **Preferred schedule** | List the amounts and dates for progress grants:1. Date: $

*Complete the first line only or add lines as necessary. Note that a multiple grant schedule will need to be accompanied by a milestone schedule and evidence provided of meeting each milestone before subsequent grants are made.* |
| **Other assistance** | Please list any assistance sought or confirmed from other sources for the proposed activity:*Please include both financial assistance and in-kind assistance* |
| **Assistance type** | Scholarship / Grant / Loan / Other :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | If a loan is sought, indicate a repayment schedule:1. Date: $
2.

*Complete the first line only or add lines as necessary. Note that an executed contract will need to confirm loan arrangements before funds are provided.* |
| *Please provide information about the proposed activity to be supported by funds from The Surveyor’s Trust, including outcomes, milestones, participants, SWOT analysis, etc* |
| **The Project** |
| **Brief Description** |  |
| **Participants** |  |
| **Outcomes** |  |
| **Milestones** |  |
| **Other** | *Add additional information such as relevant research, project plans, personal CVs, etc as considered appropriate* |
| *Please provide information about the benefits and beneficiaries of the proposed activity that justify allocation of funds by The Surveyor’s Trust and how it meets the Objectives of the trust* |
| **The Benefits** |
| **Beneficiaries** |  |
| **Benefits** |  |
| **Meeting Trust objectives** |  |
| **Acknowledgment of Trust support during activity** |  |
| **Benefits to Surveyors Trust members** |  |
| **Benefits to the industry generally** |  |
| *Please list any attachments that are part of this application* |
| **Attachments** | 1.
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