1. **APPLICANT DETAILS:**

|  |  |
| --- | --- |
| **Group:**  |  |
| **Location:** |  |
| **Annual land use agreement income (estimate):**  |  |

1. **COMMUNITY PROJECTS:**

|  |
| --- |
| **Why does your group want support from the NLC to plan and manage projects?** |
|  |
| **What are your group’s main hopes or goals for the future? Do you have a vision?** |
|  |
| **What ideas do you have for community projects?** |
|  |
| **Have you looked for other support or funding opportunities for these projects?** (Yes/No) Explain what and where: |
|  |
| **Who would be involved in planning and supporting your community projects?**[List at least four group members who want to plan projects and make them happen] |
|  |
| **Who will benefit from your community projects?** [List groups/broader community likely to benefit from projects] |
|  |

1. **COMMUNITY PROJECT FUNDING**

|  |  |
| --- | --- |
| **Does your group wish to apply for funding (of up to $50,000) to do a community project?** | [ ] YES [ ]  NO Explain: |
| **If yes, please provide a short explanation of the community project idea you are likely to support with this funding (pending feasibility and plan).\*** |  |

\***The $50,000 may be put towards a different project so long as it follows the NLC Community Projects 8-step process.**

1. **COMMITMENT:**

|  |  |
| --- | --- |
| **Can you and the above listed persons commit to attending four days of meetings per year to plan and do your project/s:** | [ ] YES [ ]  NO Explain: |
| **Are you willing to be work with others to plan and to learn new governance and project management skills along the way?** | [ ] YES [ ]  NO Explain: |
| **Would your group commit to setting aside future land use agreement income to community projects** | [ ] YES [ ]  NO  |

1. **ATTACHMENTS (OPTIONAL)**

|  |  |
| --- | --- |
| **Attach the following with your application using the templates provided:** | [ ]  Group Vision / goals for future[ ]  List of project Ideas (to be assessed for feasibility) |

1. **GROUP SUPPORT**

|  |
| --- |
| **This application is endorsed by the following group members:** |
| Name:Phone Number: Address:Signature:Name:Phone Number: Address:Signature: | Name:Phone Number: Address:Signature:Name:Phone Number: Address:Signature: |

1. **COMPLETING THE APPLICATION:**

|  |  |
| --- | --- |
| **Name of group member completing Application:** |  |
| **Signature:**  |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **NLC Officer or any other person assisting with completing the Application***:* |  |
| **Signature:**  |  |
| **Date:** |  |

 **Completed Applications can be sent to:** cpd@nlc.org.au

|  |
| --- |
| **INTERNAL NLC** |
| **LIR Requested**  | [ ] YES [ ]  NO Explain: |
| **Date:** |  |

We will contact you to tell you whether your group has been successful within **21 days** from the date that you submit this form.