

South Australian Community

Grants Application

Before completing this application, please read the SA National Science Week Community Grants Guidelines. *Please answer ALL questions, failure to do so may result in the rejection of your application.*

**Send completed applications to** **inspiringsa@sa.gov.au** **by 5pm Thursday 15 May 2025.**

*Grant amount requested $­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Project details*

|  |  |
| --- | --- |
| Name of Project |  |
| Date/s of Project |  |

*Applicant details*

|  |  |
| --- | --- |
| Contact Name |  |
| Organisation Name |  |
| Contact's Position in the Organisation |  |
| Phone |  |
| Email |  |

*If applicable, list partners to this application*

*Partner details*

|  |  |
| --- | --- |
| Contact Name |  |
| Organisation Name |  |
| Contact's Position in the Organisation |  |
| Phone |  |
| Email |  |

*If your partner is committing funds to the project/event/activity, please**provide a letter confirming their involvement and support.*

|  |
| --- |
| Description of event or activity. Maximum of 500 wordsPlease ensure you address the selection criteria listed in the Grant Guidelines. |
|  |
| *How does your event or activity do any of the following?* Maximum of 300 words* Harness curiosity or broaden scientific literacy.
* Encourage an interest and participation in STEMM related pursuits (hobbies, study, and careers).
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|  |
| *Target Audience* Which underrepresented group(s) in STEMM does your event or activity engage?  |
|  |
| *How many attendees/participants are you expecting?* |
|  |
| *Cost to participants* Will there be a cost to participants? If so, what is the charge per person? |
|  |
| *Are the objective(s)/outcomes of the event or activity?* Maximum of 300 words Tell us about what you want the participants/attendees to explore, learn, connect with or do? |
|  |
| *Have you received funding/sponsorship from other sources for this event or activity?* Yes / No. If yes, please list the sources and the funding to be provided. |
|  |
| *How much is your organisation contributing to the project?*Please include cash and in-kind support such as venue and staff/volunteer time. |
|  |
| *Communication and Marketing Plan*How will you promote your event or activity? |
|  |
| *Previous grants* If you have received a National Science Week SA Community Grant previously, please provide details and the year of the event or activity. |
|  |

*Budget*

Provide a budget of expenditure and income. Please identify any cash or in-kind collaborators or suppliers for your event.

*Add more rows to the budget if required.*

|  |  |  |
| --- | --- | --- |
| **Item** | **Cost (inc GST)** | **Expected Income** |
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|  |  |  |
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|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL** |  |  |

*If you have any questions about the grants and the application process, contact:*

Inspiring SA Program Manager, InspiringSA@sa.gov.au

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**by 5pm Thursday 15 May 2025**

**Please include the name of the organisation applying for the grant in the file name.**