

COMMUNITIES ENVIRONMENT PROGRAM EXPRESSION OF INTEREST FORM

ORGANISATION NAME: _____

ORGANISATION ABN: _____

TYPE OF ELIGIBLE ORGANISATION: (Please tick)

Local Government

Incorporated Not-For-Profit Organisation or Club

Incorporated Trustee of a Trust with responsibility for a Community Asset

CONTACT NAME: _____

CONTACT PHONE NUMBER: _____

CONTACT EMAIL: _____

NAME OF PROPOSED PROJECT: _____

TOTAL PROJECT COST: \$ _____

GRANT AMOUNT SOUGHT: \$ _____

Project descriptions suitable for public use (max.750 characters)

Explain how your project will:

- deliver positive environmental and social outcomes
- provide communities with the resources, skills and knowledge to care for the environment