

Adopt-A-Patch

Funding Request Form



The City of Kalamunda's Adopt-A-Patch (AAP) Program has been operational since 2015 and has provided schools within the Local Government Area with initiatives and resources to educate and foster environmental stewardship among students in their local natural areas.

We invite schools interested in providing environmental education activities and opportunities for their students to fill out this form. Kindly outline the scope of your project and the intended learning outcomes. We have designed this form to be as user-friendly and straightforward as possible.

As funding is limited, requests will be prioritised and evaluated based on the information provided. While in-kind contributions aren't compulsory, applications that include them will be prioritised and considered favourably.

For further inquiries about the program or to discuss the eligibility of your school's project or initiative, or assistance with filling out this form, please contact the City during business hours at 9257 9999.

Please complete and return this form to environment@kalamunda.wa.gov.au

APPLICANT DETAILS

Name of School:

Contact Person:

Position of Contact:

Best Method of Contact: Phone Email In-Person Other

Contact Details: Phone: Email: Other:

Is your school located within the City of Kalamunda Local Government Area?: Yes No

Only schools registered in the City of Kalamunda are eligible to apply.

Has your school previously received AAP funding from the City of Kalamunda?: Yes No

If yes, please list previous projects/initiatives and the year they were completed:

PROJECT/ACTIVITY DETAILS

(Please refer to the environmental education incursion document for a list of available environmental education workshops)

Project Title:

Year Group	Kindergarden	Pre Primary	Year 1	Year 2	Year 3	Year 4	Year 5
	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12

Proposed term for project delivery: Term 1 Term 2 Term 3 Term 4

Proposed Date: Proposed Time:

The proposed date and timing are not fixed and may change depending on the presenter or workshop availability. A City Officer will liaise with you to finalise a suitable date and time.

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Where will the project take place?:

If other, please specify:

Please describe the type of activity and its location:

Brief description, e.g. "The smoking ceremony will occur at the yarning circle in the campus bushland area located at the southeastern corner of the property."

Provide a brief description of your project:

Short description of the project/initiative, e.g. "A nest box workshop led by local ecologist Simon Cherriman, offering students a hands-on learning experience to understand and create habitats for local and threatened bird species."

Provide a brief description of your expected environmental learning outcomes of the project:

Summary of expected learning outcomes e.g "Students will learn about the biology, life cycle, and habitat requirements of the local threatened Red-tailed back cockatoo."

Please select the theme that best relates to the project:

Other:

How will this project benefit the environment and the wider community?:

Consider local implications, the improvement on your land, ecosystem, and larger benefit to the surrounding areas. Consider how the students' knowledge can be passed onto their parents.

Will you require assistance from City staff with the delivery of your project? Yes:

No:

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If yes, please specify what type of assistance will be required?:

Do you give the City permission to promote your initiative throughout the City's social media channels? Yes No

How will the City of Kalamunda's support be recognised?

This can include photos/logos in the school newsletter, blog, or website. A photo consent form will be provided to you. Please ensure that signed copies of the forms are returned to the City before the project's start date.

Would you like to sign up to the City of Kalamunda environmental newsletter? Yes No

FUNDING DETAILS

Expense description and Quantity <i>e.g. 250x native tubestock</i>	Estimated Amount <i>e.g. 2 \$4 per plant - Zanthorea Nursery</i>
Requested Total Funding Amount:	\$
Additional Information:	
Additional Contributions <i>Providing in-kind contributions is not compulsory, but applications that include them are prioritised and are more likely to be approved. These contributions can include but are not limited to students installing native plants, to weeding, picking up rubbish or collecting citizen science data in local bushland.</i>	
School in-kind support details <i>e.g. Students picking-up rubbish in nearby bushland reserve</i>	Amount <i>e.g. 16 students for 4 hours over two months</i>
Total Applicant Contribution (in hours):	
Additional Information:	

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SUBMISSION DECLARATION

Please read the submission statements below and ensure compliance with the following:

- I am authorised by my organisation to complete and submit this application form.
- I certify that to the best of my knowledge all of the information supplied in this application and attachments is true and correct.
- I will notify the City of Kalamunda of any change to the information supplied and any other information or circumstances arising that may affect this application.
- I understand that this is an application only and may not necessarily result in funding approval.
- I give permission for the City of Kalamunda to contact any person or organisation required during the assessment of the application and understand that information may be provided to other agencies, as appropriate.
- I understand that any decision made by the City of Kalamunda is final and is not subject to an appeals process.
- I will be bound by the contents of this application to carry out the activities as described in this application, which will form part of the contractual agreement with the City of Kalamunda.
- The activities delivered will be covered by appropriate insurance.
- All relevant health and safety standards will be met.
- City of Kalamunda does not accept any liability or responsibility for the activities.

I have read and agree to the above submission statements.

Name:

Signed:

Date:

Thank you for taking the time to complete this form.

Please send the completed copy of this form to the City of Kalamunda at environment@kalamunda.wa.gov.au
with the subject line "AAP Funding Request: [Your School's Name]"

For further inquiries or assistance with filling out this form, please contact the City during business hours at 9257 9999

We look forward to receiving your application!

PRIVACY NOTICES

- The City of Kalamunda will use the information provided for processing your application and maintaining contact with you.
- Please be aware that the details provided in your application and any associated documentation or discussions may be shared with members of the assessment panel to facilitate the processing of your application.
- By submitting an application, you consent to the City of Kalamunda publishing the applicants name, project description and amount funded in promotional material used for promoting the Adopt-A-Patch Program.
- The City of Kalamunda values the privacy of its customers and stakeholders.
- Please [click here](#) for further information on our privacy statement.
- Your feedback is greatly appreciated. Upon completion of the project, we will provide you with a feedback form. Your input will help us evaluate the project's success and enhance our services.