***[****Click here to enter a date]*

To Redland City Council,

*[Insert AUSPICE organisation name]* is aware that *[Insert APPLICANT organisation name]* is applying for a grant under the Redland City Council Community Grants Program.

We understand that the applicant organisation does not meet the eligibility criteria and requires a legal entity to act as an auspice. We confirm that if [Insert APPLICANT organisation name] is successful in their grant application, we will act as their auspice and have our details recorded against their grant application.

|  |  |
| --- | --- |
| Auspice organisation name | [Insert AUSPICE organisation name] |
| Auspice ABN | [Insert AUSPICE organisation ABN] |
| Auspice incorporation number | [Insert AUSPICE organisation incorporation number] |
| Auspice phone number | [Insert AUSPICE organisation phone number] |
| Auspice address | [Insert AUSPICE organisation address] |

*[Insert AUSPICE organisation name]* understand we will be responsible for these **compulsory obligations**: *(use tick boxes)*

|  |  |
| --- | --- |
|  | Receipt, bank and administer all monies |
|  | Monitor the project and ensure timely completion |
|  | Complete the financial acquittal and ensure funding is acquitted on time. |

*[Insert AUSPICE organisation name]* will also provide the following **optional support** to the applicant *(tick only relevant items)*

|  |  |
| --- | --- |
|  | Provide insurance for the project |
|  | Provide mentoring for the auspiced group |

This auspice agreement is signed by the authorised representative from each organisation:

|  |  |
| --- | --- |
| *[Insert AUSPICE organisation name]*  | *[Insert APPLICANT organisation name]*  |
| **Name:** …………………………………………………………………….. | **Name:** …………………………………………………………………….. |
| **Position:** …………………………………………………………………. | **Position:** …………………………………………………………………. |
| **Signature:** ................................................................... | **Signature:** ................................................................... |
| **Date:** / /  | **Date:** / /  |