

2026-27 MCGP Category A

Form Preview

Eligibility

* indicates a required field

i Information

Please read the **Multicultural Connect Grants Program Funding Guidelines** before starting your application.

You can access the Guidelines and learn more about the program by visiting the [Multicultural Connect Grants Program](#) website

i Assistance

Translation

Need help in your language? If you have difficulty understanding this form or other funding documents and need language assistance, please call 1800 512 451 and ask for an interpreter.

If you would like to submit your application form in a language other than English, please email Multicultural Affairs Queensland at funding@maq.qld.gov.au for more information **before 31 July 2026**.

i Multicultural Affairs Queensland

If you have any questions regarding the Funding Guidelines or application form, please email Multicultural Affairs Queensland at funding@maq.qld.gov.au and quote your GRANT ID number below:

This field is read only.
The identification number or code for this submission.

i SmartyGrants

If you need technical assistance with your SmartyGrants account or online form, contact SmartyGrants Technical Support on (03) 9320 6888 or service@smartygrants.com.au.
Support Desk Hours: 9.00am 5.00pm AEDT, Monday - Friday.

You can sign up or find out more at <https://applicanthelp.smartygrants.com.au/smartyfile/>

i Register with SmartyFile

SmartyFile is a free data repository by SmartyGrants. SmartyFile allows organisations to collaborate with team members, pre-fill information into SmartyGrants forms, and manage, view, search and sort submissions across multiple grant funders in one spot.

2026-27 MCGP Category A

Form Preview

Applicants with a SmartyFile organisation profile and appropriate permissions can share an application with other team members of their organisation, and change the owner of the application to another team member.

To learn more about SmartyFile go to <https://applicanthelp.smartygrants.com.au/smartyfile/>

- Users who are registered with SmartyGrants will already have a login. To log in or create your organisation profile, go to <https://app.smartyfile.com.au/>
- To register for SmartyFile, go to <https://smartyfile.smartygrants.com.au/applicant/register>

i Ethnic Communities Council of Queensland (ECCQ)

If you need **grant writing and project planning assistance**, you can visit the [ECCQ website](#) for information on upcoming education workshops and to access their [Online Learning Hub](#) for courses and resources.

i Applicant Eligibility

This section of the application form is designed to help you, and us, understand if your organisation is eligible for this grant. It is important that you complete these questions first to avoid spending time applying for an unsuitable grant.

If you have any questions regarding the eligibility criteria, please contact funding@maq.qld.gov.au.

I confirm that the applicant organisation is a *

- ☐ Incorporated association
- ☐ Company limited by guarantee
- ☐ Company limited by shares registered as a charity with the ACNC
- ☐ Cooperative
- ☐ Aboriginal and Torres Strait Islander corporation
- ☐ Local Government Authority (Council)
- ☐ None of the above

and *

- ☐ has a registered and active Australian Business Number (ABN) in the same name used in the application
- ☐ has an Australian bank account in the name of a legal entity
- ☐ actively operates in Queensland
- ☐ has public liability insurance (of at least \$10 million) in place for this project;
- ☐ does not have any overdue reports, service delivery or performance issues for funding provided by Multicultural Affairs Queensland

At least 5 choices must be selected.

All 5 choices must be selected to be eligible.

Local Government constituted under the Local Government Act 2009 *

- ☐ must engage/consult with one or more multicultural organisations in delivering the project

Contact Details

* indicates a required field

Privacy Notice

Multicultural Affairs Queensland is collecting your personal information, including your:

- Name
- Email address
- Phone numbers.

We are collecting your information to administer the grants program, and to contact you to discuss your submission, if required. We usually give the personal information we are collecting to assessment panel members (which may include members from other Queensland Government entities and external entities) and other Queensland Government agencies.

Your personal information may also be disclosed to the Minister for Multiculturalism and relevant Members of Parliament for official purposes related to this program, including stakeholder engagement, announcements and recognition of successful applicants.

Successful applicants may have the organisation's contact details and a description of the project included in the [Ministerial Media Statement](#) announcing the program funding outcomes.

We will not use your personal information for any other purpose unless we are authorised or required under an Australian law, or court or tribunal order to do so.

You can find our privacy policy at <https://www.dwatsipm.qld.gov.au/information-privacy>. Our policy explains how you can access and amend your personal information, how to make a complaint about the way we have handled your personal information, and how your complaint will be handled.

If you have questions about how we manage your personal information, contact Manager, Governance, Planning and Reporting at privacy@dwatsipm.qld.gov.au.

If you choose not to give us your personal information, this might impact our ability to administer your application.

⚠ Important: Applicants please note

Before starting this application form,

- you must read the [Funding Guidelines](#).
- This is the **Category A application form for the 2026-27 Multicultural Connect Grants Program \$10,000 to \$100,000 funding**.
- Incomplete applications or submissions after the closing date will not be considered.

Completing this form

You may begin anywhere in this form - ensuring you save as you go.

2026-27 MCGP Category A

Form Preview

I understand that:

- Answers are to be clear and concise.
- Responses to questions must be entered in the relevant application fields, and **not** submitted as attachments.
- Application forms cannot be submitted if responses exceed a maximum word count limit. Questions will note any maximum word count.
- Responses must **not** be provided in ALL CAPITALS (uppercase). Standard sentence formatting must be used.
- All applications can be submitted at any time until **11:59pm 30 August 2026**
- Late or incomplete applications will not be accepted to ensure fairness to all applicants
- If the application is successful, the applicant organisation will enter into a contract with the Queensland Government which binds successful applicants.

The Funding Governance and Agreement Requirements will consist of :

- the Funding Agreement between your organisation and the Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism
- the Funded Activity Particulars
- your approved application
- the 2026-27 Multicultural Connect Grants Program Funding Guidelines for Capital Infrastructure Projects
- the department's Funding Acknowledgement Guidelines.

I understand *

- ☐ Yes
☐ No

You must confirm that all statements above are true and correct.

Applicant Details

Organisation Name *

Organisation Name

✓Capitalise Each Word. #Do not use ALL CAPITALS. Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with ASIC, ORIC or Office of Fair Trading.

- If a legal entity, use the full legal registered name of the organisation.
- Check your spelling and make sure you provide the same name that is listed in official documentation such as with the:
 - [Office of Fair Trading \(OFT\)](#);
 - [Australian Securities and Investments Commission \(ASIC\)](#);
 - [Office of the Registrar of Indigenous Corporations \(ORIC\)](#)

Is your organisation known by another name? *

- ☐ Yes
☐ No

For example: The organisation is more commonly known by its Business Name and not the legal entity name.

2026-27 MCGP Category A

Form Preview

What is your business name or other name? *

For example: The organisation is more commonly known by its Business Name and not the legal entity name. Leave blank if not relevant.

Organisation Contact Details

If possible, please provide a generic phone number and email for the organisation. For example a reception number or email address.

Postal Address *

Address

To use a PO Box, enter it manually by clicking 'Can't find your address'.

Office Street Address

Address

Leave blank if the organisation does not have a physical office.

Organisation Main Phone Number *

If available, please provide a generic phone number for the organisation. For example a reception number. Must be an Australian phone number and at least 10 characters. Insert area code before the number e.g. (07)

Organisation Main Email *

If possible, please provide a generic email for the organisation. For example info@email.com or reception@email.com. Must be a valid email address.

Website

Must be a URL.

Facebook Page

Must be a URL.

Primary Organisation Contact

This person will be contacted about the application and if successful, the funding agreement.

✓ Capitalise Each Word # Do **not** use ALL CAPITALS

2026-27 MCGP Category A

Form Preview

Name *

Title

First Name

Last Name

Position Title *

Please enter in the full position title e.g. enter Chief Executive Officer and not CEO

Landline Phone Number

Must be an Australian phone number.
Insert area code before the number e.g. (07) 1234 5678

Mobile Phone Number

Must be an Australian phone number and 10 characters.

Email Address *

Must be an email address.

Secondary Organisation Contact

This person will be contacted about the application if the Organisation Contact is unavailable. ✓ Capitalise Each Word #Do **not** use ALL CAPITALS

Name *

Title

First Name

Last Name

Position Title *

Enter in the full position title e.g. write Chief Executive Officer and not CEO

Landline Phone Number

Must be an Australian phone number.
Insert area code before the number e.g. (07) 1234 5678

Mobile Phone Number

Must be an Australian phone number and 10 characters.

Email Address *

Must be an email address.

Project Contact

This person will be contacted about the project and its activities. ✓ Capitalise Each Word # Do **not** use ALL CAPITALS

Name *

Title

First Name

Last Name

2026-27 MCGP Category A

Form Preview

Position Title *

Please enter in the full position title e.g. Chief Executive Officer and not CEO

Landline Phone number

Must be an Australian phone number.
Insert area code before the number e.g. (07) 1234 5678

Mobile number

Must be an Australian phone number and at least 10 characters

Email address *

Must be an email address

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE".

Organisation Details

* indicates a required field

Organisation Type

What type of organisation are you? *

Attach a copy of the organisation's legal registration documentation. *

Attach a file:

A maximum of 1 file may be attached.

Certificate of Incorporation, Certificate of Registration, or Letters Patent

The attachment must be one of the following:

- *Certificate of Incorporation* as an association from the [Office of Fair Trading \(OFT\)](#) or similar;
- *Certificate of Registration* as a Company from [Australian Securities and Investments Commission \(ASIC\)](#);
- *Certificate of Registration* as a Co-operative from [Australian Securities and Investments Commission \(ASIC\)](#);

2026-27 MCGP Category A

Form Preview

- *Certificate of Registration* as an Aboriginal and Torres Strait Islander Corporation from [Office of the Registrar of Indigenous Corporations \(ORIC\)](#); or
- *Letters Patent* issued to organisations established through an Act of Parliament.

Australian Business Number (ABN) details

The ABN must be registered in the same entity name as the organisation name.

What is the organisation's Australian Business Number (ABN)? *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity Name	
ABN Status	
Entity Type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

You can search your organisation's ABN at <https://abr.business.gov.au/>.

Is the organisation registered for GST? *

- ☐ Yes
☐ No
☐ Yes but is a local government

The Goods & Services Tax (GST) status in the Australian Business Register above will indicate this.

Is the ABN main business location in Queensland? *

- ☐ Yes - the ABN main business location is in Queensland
☐ No - the ABN main business location is not in Queensland

The 'Main business location' field in the Australian Business Register above will indicate this.

To be eligible to apply, you must be an organisation that is located in and/or actively provides services within the State of Queensland. As your ABN main business location is not in Queensland, you must provide details and evidence of the active services your organisation provides in Queensland.

Provide details of the services your organisation provides in Queensland *

2026-27 MCGP Category A

Form Preview

Provide evidence of services your organisation provides in Queensland. *

Attach a file:

A minimum of 1 file must be attached.

Is this the organisation's first time applying for funding from Multicultural Affairs Queensland? *

- ☐ Yes
- ☐ No
- ☐ Unsure

Provide details about the services your organisation delivers. *

Word count:

Must be no more than 200 words.

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE".

Capital Infrastructure Project Information

* indicates a required field

For capital infrastructure projects, organisations are responsible for:

- **obtaining all relevant approvals required to complete the project;**
- **ensuring a safe work environment in accordance with Work Health and Safety (WH&S) Act, Regulation and Codes of Practice; and**
- **engaging the use of licensed contractors to undertake related works for the project.**

Please note projects must:

- be located in Queensland
- include matching funding by the applicant
- own the property and/or have owner consent to conduct the works on the site
- involve one site, not multiple sites
- demonstrate willingness to allow and enable access to facilities by other multicultural organisations/groups and the broader community
- if successful, be construction ready within eight (8) weeks of notification of funding approval
- **Category A projects must commence by 1 December 2026 and be completed by 30 December 2028**
- have sufficient level of time and cost contingency built into the project plan.

2026-27 MCGP Category A

Form Preview

I understand and accept the above requirements *

☐ Yes

PROJECT DETAILS

Project Title *

Word count:

Must be no more than 120 characters.

Ensure the title is short but descriptive as we will use the title on all correspondence and promotions.

✓Capitalise Each Word. #Do not use ALL CAPITALS.

Total Project Cost *

Must be a whole dollar amount (no cents).

What is the total budgeted cost (dollars) of your project? The total cost of your overall project includes funding from all sources, and will be more than the amount of grant funding you are requesting.

Total MCGP Funding requested *

Must be a whole dollar amount (no cents) and between 10000 and 100000.

What is the total financial support you are requesting in this application?

To be eligible for funding, you **MUST** provide co-contributions and verify that the co-contribution is confirmed or otherwise available. Your co-contribution value should equal or be greater than amount of funding you are seeking. You will be required to provide further details on the co-contributions for your project in the Activity Budget mandatory attachment.

Applicant Matching Cash Contribution *

Must be a whole dollar amount (no cents).

What is the total value of all other financial co-contributions towards the project (excluding the amount of grant funding you are requesting in this application)?

Validation

This number/amount is calculated.

'Applicant Matching Cash Contribution' minus 'Total MCGP Funding requested'

What will the funding be used for? *

- ☐ Building a new community facility including community halls, meeting spaces and hubs, or sporting facilities
- ☐ Upgrading community facilities including community halls, meeting spaces and hubs, or sporting facilities
- ☐ Additional rooms or space

2026-27 MCGP Category A

Form Preview

- ☐ Extending community facilities
- ☐ Refurbishing rooms or enhancements (painting, electrical, flooring or lighting)
- ☐ Upgrading/providing storage facilities
- ☐ Upgrading accessibility to community facilities
- ☐ Building new structures that will facilitate community connection (e.g. community gardens, sport structures)
- ☐ Building/ upgrading car parks which serve the above

Tick all areas applicable

Provide a concise summary of the proposed project, including how it will benefit the multicultural community and the positive outcomes expected to be achieved.

*

Word count:

Must be no more than 500 words.

Proposed Start Date *

Must be a date and between 1/12/2026 and 30/12/2027.

Proposed End Date *

Must be a date and between 1/12/2026 and 30/12/2028.

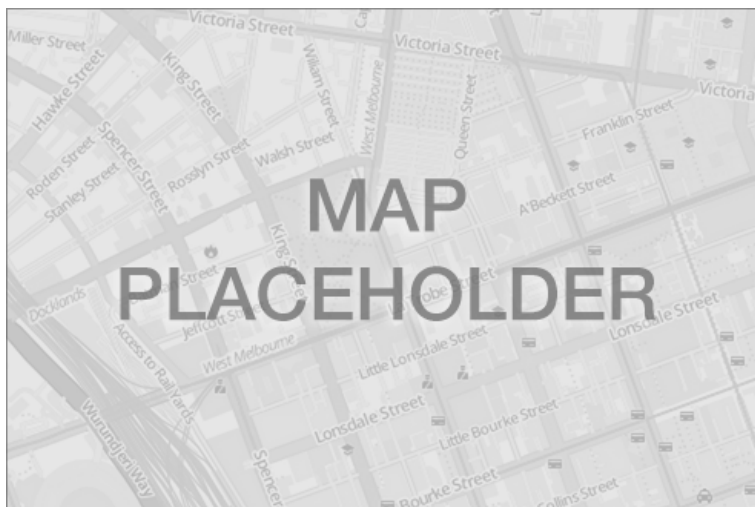
Project Location

What is the location of the project? *

Address

2026-27 MCGP Category A

Form Preview



This must be a street address. You can move the position of the pin on the map to adjust the project location.

If the street number is not known, please provide the Lot number.

ALIGNMENT WITH FUNDING GUIDELINES

The following questions align with the assessment criteria indicated in the [2026-27 Grant Program Guidelines for Capital Infrastructure Projects](#).

The MCG program supports capital infrastructure projects that deliver lasting benefits for multicultural communities across Queensland.

Successful projects are expected to achieve the following :

- **Timely and cost-effective delivery**

Projects are completed on time and within budget, demonstrating efficient project management and value for money.

- **Increased use by multicultural organisations and groups**

Facilities support a broader range of multicultural organisations and community groups to deliver meetings, events, activities and services, encouraging greater collaboration and community participation.

- **Enhanced and flexible infrastructure**

Projects deliver safe, accessible, and adaptable facilities that meet the diverse needs of multicultural communities, including permanent and multi-purpose spaces.

- **Better accessibility and inclusivity**

Facilities are welcoming, culturally appropriate, and designed to improve accessibility and inclusion for multicultural communities and the broader public.

- **Stronger community connection and partnerships**

Projects create opportunities for communities to connect, participate, and build stronger relationships across cultures, contributing to a more inclusive and resilient Queensland.

Demonstrate alignment with program objective and outcome/s

Describe how your project aligns with the program objectives of the MCG program? *

Word count:

Must be no more than 1000 words.

Letters of Support

- **Applicants** are required to provide **letters of Support** from multicultural organisations/groups that will use the facility who do not currently have a permanent space.
- **Local government bodies** are required to provide **letters of Support** from multicultural organisations or groups they will be partnering with to deliver the project.

Name of organisation

Letter of Support

	Attach one form per row

Outcomes

Demonstrate how your project aligns with all of funding outcomes.

Robust outcomes monitoring is a priority. The MCGP will provide funding to capital infrastructure projects that achieve all of the funding outcomes.

Please consider how impact relating to these outcomes will be measured through your activity.

Timeframes:

- Immediate outcomes occur directly following an activity (e.g. within 1 month);
- Medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and
- Long-term outcomes are those we expect to see years later (e.g. 5 to 10 years after the activity).

If you need more help understanding what outcomes are, read the materials at: <https://ourcommunity.com.au/evaluation> Go to the Funding Centre's Answers Bank at <https://www.fundingcentre.com.au/answersbank#Qu4> if you need some ideas about how to frame your response.

Your outcomes	Timeframe	Alignment with our outcomes	How does your intended outcome link to our outcomes?	How will the outcome be measured?
Must be no more than 20 words.	When do you expect this	Which of our outcomes will your	Please explain how your intended	Add notes if you need to provide more context.

2026-27 MCGP Category A

Form Preview

	outcome to emerge?	project contribute to? One per row	outcome helps contribute to ours. Must be no more than 100 words.	Must be no more than 100 words.

Demonstrate Community need, benefit and accessibility of the project

What evidence do you have on the need and value of the project and how will it support or benefit both the multicultural community and the wider community? *

Word count:

Must be no more than 2000 words.

What evidence do you have on stakeholders and community support for the project *

Word count:

Must be no more than 2000 words.

How will your project provide access to the multicultural organisations, groups and the broader community and use of facility? *

Word count:

Must be no more than 500 words.

How will your project support inclusion. Participation and cross cultural connection? *

Word count:

Must be no more than 500 words.

2026-27 MCGP Category A

Form Preview

Who are the primary beneficiaries of this project/program? *

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of this project/program

Who are the partners you will work with in the delivery of the project?

Insert **one** organisation per row. Click '**Add More**' to include additional rows

Organisation Name	Organisation Type	Role/contribution to Status the project
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For example: community associations, sporting groups and service clubs	What type of entity are they?	What involvement will this organisation have, and how? Must be no more than 5 words.	

Where relevant, evidence of partnerships or shared use arrangements

Attach a file:

Attach any documents

Project readiness and deliverability

Demonstrates project readiness to start the project on 1 December 2026.

- Regulatory and/or development approvals required are in place.
- Project designs and costings are underway or finalised.
- Community consultation has taken place.
- Authority from the land or infrastructure owner to undertake the project at the nominated site.
- Funding contributions from all sources.

What stage of readiness is the project at? *

- ☐ 1. Conceptual stage
- ☐ 2. Design and planning stage
- ☐ 3. Tender stage
- ☐ 4. Signed contract with contractor
- ☐ 5. Sketch plans/seek approvals
- ☐ 6. Ready to proceed to construction
- ☐ 7. Other (please specify below)

If other, please specify *

2026-27 MCGP Category A

Form Preview

It is a requirement that relevant regulatory approvals will be in place to start construction from 1 December 2026. If successful, can you confirm your project will have the relevant approvals in place? *

- ☐ Yes
- ☐ No

What relevant approvals will be required to deliver the project (planning/building/plumbing)? *

Word count:

Must be no more than 200 words.

Have the relevant approvals been sought to deliver the project. *

- ☐ Yes, received
- ☐ No, lodged and awaiting decision
- ☐ No, required and yet to lodge
- ☐ Not required

Who is the owner of the land or facility where the project is to be located? *

- ☐ Organisation
- ☐ Council (owned or managed land)
- ☐ State Government
- ☐ Other (please specify below)

If other, please specify *

It is a requirement that the applicant has ownership or permission to use the land/infrastructure to deliver the project. Upload a letter of consent from the landowner to undertake these works *

Attach a file:

Does the organisation have a registered lease or permit to occupy for at least a three-year period? *

- ☐ Yes
- ☐ No
- ☐ In progress

☐ Not applicable – owned by applicant

What is the lease period? *

If no and not owned by the applicant, what arrangements are being put in place to seek this lease or permit? *

Demonstrate applicant capacity, capability, experience and resources

What experience, skills, and staff does the organisation have in successfully planning and delivering capital infrastructure projects within identified budget and timeframes? *

Word count:

Must be no more than 500 words.

Will you be engaging a third party to deliver the project? *

- ☐ Yes
☐ No

Please provide information about the third party and their experience and resources. *

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE".

Project Plan

Milestones

Please tell us about the key milestones (stages) you expect to pass through as part of your project.

2026-27 MCGP Category A

Form Preview

Insert one milestone per row. Click '**Add More**' to add more rows for additional milestones.

Hints: Click the 'Maximise' button above the top right corner of the table to increase this section to full screen. You can increase the size of large text boxes by clicking and dragging the two diagonal lines in the bottom right corner.

Milestone	Start date	End date	Notes
Must be no more than 20 words.	Must be a date.	Must be a date.	Add notes if you need to provide more context. Must be no more than 100 words.

Activities

Provide a clear and detailed project plan with key activities, timing, responsibility and costs that are realistic and achievable to successfully deliver your project.

Insert one key activity per row. Click '**Add More**' to add more rows for additional activities.

Examples of activities include:

Activity Title	Activity Description
----------------	----------------------

Implementation / Preparation	Finalise contracts, engaging contractors / labourers/ site preparation – safety check, fencing, signage etc
------------------------------	---

Procurement

Sourcing suppliers, service, equipment/materials, furniture, whitegoods, etc Raising Purchase orders,

Minor works	Refurbishment of kitchen, carpentry - building new shelving, painting - function room walls, install flooring/tiles
-------------	---

Construction	Earthworks, site preparations, concreting works, delivery of materials, plumbing works, electrical works
--------------	--

Hints: Click the 'Maximise' button above the top right corner of the table to increase this section to full screen. You can increase the size of large text boxes by clicking and dragging the two diagonal lines in the bottom right corner.

Key Activity Title	Description	Start date	End date	Responsibility	Cost
Must be no more than 6 words.	One per row. Add more rows if you want to list additional activities. Must be no more than 20 words.	Must be a date.	Must be a date.	Must be no more than 100 words.	Must be a dollar amount.

2026-27 MCGP Category A

Form Preview

If you have a commissioned project plan, this can also be uploaded.

Attach a file:

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE".

Project Budget

* indicates a required field

Budget Instructions

- Indicate in the budget table below a reasonable, clear and justified budget which allows for a **sufficient percent of contingency**, where relevant, to cover any unexpected cost increases.
- The budget table should also **demonstrate adequate financial arrangements** are in place to deliver and complete the project.
- Itemise your total project budget in the income and expenditure tables below, including **details of other funding you have applied for (confirmed or not)** to successfully deliver the project. Ensure this is broken down against each item/works to be delivered so that it is easily distinguishable what the funding is being used for and what it is delivering.
- Responses are required in the fields below and cannot be submitted as attachments.
- Use whole dollar amounts (no cents)
- Do not use commas in amounts – e.g. type 1000 not 1,000. This will ensure your figures for each table add up correctly.
- Insert '0' against items not relevant to your project.
- Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns.
- List expenses of different categories on separate lines.
- Click 'Add More' to include additional rows.

Your budget should balance (*TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT*).

You will be asked to provide further information if the budget does not balance.

⚠ Goods and Services Tax (GST)

As you have advised that your **organisation IS registered for GST**, you must provide the **GST exclusive** amounts for the expenditure.

For any advice on GST, the applicant is advised to seek independent professional advice on taxation obligations or seek assistance from the ATO on 13 28 69 or via its website at www.ato.gov.au. Multicultural Affairs Queensland is unable to provide advice on the applicant's particular taxation circumstances.

2026-27 MCGP Category A

Form Preview

△ Goods and Services Tax (GST)

As you have advised that your **organisation is NOT registered for GST**, you must provide the **GST inclusive** amounts for the expenditure.

For any advice on GST, the applicant is advised to seek independent professional advice on taxation obligations or seek assistance from the ATO on 13 28 69 or via its website at www.ato.gov.au. Multicultural Affairs Queensland is unable to provide advice on the applicant's particular taxation circumstances.

△ Goods and Services Tax (GST)

As you are a **local government**, you must provide the **GST inclusive** amounts for the expenditure.

For any advice on GST, the applicant is advised to seek independent professional advice on taxation obligations or seek assistance from the ATO on 13 28 69 or via its website at www.ato.gov.au. Multicultural Affairs Queensland is unable to provide advice on the applicant's particular taxation circumstances.

Income

MCGP Funding Amount Requested

Funding Amount Requested (GST Exc) *

\$

Applicant Matching Cash Contribution

Matching Cash Contribution *

\$

Additional Income

Please outline your project income in the budget table below, including details of other income or funding that you have applied for, whether it has been confirmed or not. **All additional income amounts are GST exclusive**

Your budget **MUST** balance (**TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT**)

Income type	Income description	Is this funding confirmed?	Income amount (budgeted)	Notes
Select the type of income	Provide the name of the funding program or the corporate sponsor. Must be no more than 10 words.		Enter the total amount expected to be received.	Add notes if you need to provide more context. Must be no more than 50 words.

2026-27 MCGP Category A

Form Preview

Income Totals

MCGP Funding Requested + Applicant's Matching Cash Contribution + Total Additional Income = Total Income Amount

MCGP Funding Requested	Matching Cash Contribution	Total Additional Income	Total Income Amount
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.

Expenditure

- The section below will allow you to enter in expenses related to the successful delivery of the project.
- Ensure costs are strictly for the delivery of the project, including contractors, external labour hire and external consulting expenditure, materials for construction, and hired/ leased plants.
- Insert all of the expenditure items for the whole project, indicating the items where this funding will be used. Provide a clear description to further explain the expense.
- **Note:** If seeking funding for equipment, this is capped at 10% of the funding sought.

IMPORTANT: Ensure you include any in-kind income in the expenditure.

Project Budget (Expenditure)

- Insert all of the expenditure items for the whole project, indicating the items where program funding will be used.
- Select the type of expense and provide a clear description if further explanation is required.
- List expenses of different categories in separate rows.
- Insert **one** expense per row. Click '**Add More**' to include additional rows.

Hint: Click the '**Maximise**' button above the top right corner of the table to increase this section to full screen

Expenditure Item	Description	MCGP Funding Allocation	Total Expenditure Amount	Notes
Select expenditure item	Provide a detailed and clear description for the assessors to understand what and how the funding will be used towards	Enter the amount of grant funding to be expended on this budget item.	Enter the total amount to be expended on this budget item.	Add notes if you need to provide more context.

Please note, these items must be eligible under the grant as according to the guidelines.

2026-27 MCGP Category A

Form Preview

Total Expenditure

MCGP Funding Expenditure

This number/amount is calculated.

Total MCGP Funding requested
MUST match total MCGP funding
expenditure allocation

Total Expenditure Amount

This number/amount is calculated.

Total Expenditure Amount MUST
match total project cost

Funding Allocation

The below totals will assist you to correctly allocate the program funding against the expenditure, and allocate the total income against the total expenditure.

MCGP FUNDING ALLOCATION MCGP Funding Requested - MCGP Funding Expenditure = Funding Allocation Balance.

- ✓ If the **Funding Allocation Balance equals \$0**, you have correctly allocated the Funding Allocations.
- # If the **Funding Allocation Balance does not equal \$0**, please check your expenditure items and allocated funding.

TOTAL INCOME ALLOCATION Total Income - Total Expenditure = Budget Surplus or Deficit.

- ✓ If the **Budget Surplus or Deficit equals \$0**, you have correctly allocated the Total Income.
- # If the **Budget Surplus or Deficit does not equal \$0**, please check your expenditure items and allocated funding. Ensure any in-kind income contributions are included in the expenditure table.

MCGP Funding Requested

This number/amount is calculated.

MCGP Funding Expenditure

This number/amount is calculated.

Funding Allocation Balance

This number/amount is calculated and must equal 0

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

Budget Surplus or Deficit

This number/amount is calculated.

ERROR: The total of the Expense Amounts Total does not equal the Funding Requested

You must revise the Expense Amounts in the Expenditure tables above so they equal the Funding Requested.

Evidence of Cash Contribution

It is a requirement that applicants are to match the grant amount sought. Please provide evidence of your confirmed cash contribution (either through a bank statement or Accountant Declaration) *

Attach a file:

2026-27 MCGP Category A

Form Preview

What financial arrangements are in place to ensure the successful delivery and completion of the project? *

Word count:

Must be no more than 100 words.

Do you have any additional comments regarding the budget? *

- ☐ Yes
☐ No

Provide any additional comments regarding the budget. *

Word count:

Must be no more than 200 words.

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE".

Payment Documentation

* indicates a required field

Electronic Funds Transfer (EFT) form

An [Electronic Funds Transfer \(EFT\) form](#) is required to be uploaded as part of your application to ensure funding is provided to successful applicants as quickly as possible after the funding announcement. This form provides Multicultural Affairs Queensland with the organisation's bank account details for the direct deposit of the approved funds. **Submitting the EFT form does *not* guarantee your organisation will receive funding.**

Download a copy of the [EFT Form template](#), complete **all** fields, sign, and upload the completed form. Refer to the [Funding Guidelines](#) for a sample completed EFT form.

EFT form checklist:

- All 18 fields are **mandatory** and **must** be completed.
- New forms **must** be completed for each funding round. Forms completed for previous funding rounds are **not** permitted.
- Only **one** email address for remittances is permitted in the form. All payment remittances from Multicultural Affairs Queensland will be emailed to this address.
- Only **one** telephone number is permitted in the form.

2026-27 MCGP Category A

Form Preview

- The form **must** be certified as correct by **two** members of the organisation, signed and dated.
- The form **must** have signatures. Typed names and initials are **not** permitted.
- If the application is being auspiced, the EFT form **must** be completed by the auspicings organisation.

Incorrect or incomplete forms will delay the processing of payments.

Please review your completed EFT Form to ensure the form has: *

- ☐ the organisation name, postal address and the correct ABN;
- ☐ the organisation telephone and email address for remittances;
- ☐ the name of the bank or financial institution, and the bank account name;
- ☐ a 6 digit BSB number, and the correct bank account number;
- ☐ been certified as correct by two members of the organisation, signed and dated.

At least 5 choices must be selected.

Please attach a completed and signed EFT form *

Attach a file:

A maximum of 1 file may be attached.

The EFT Form template can be downloaded [here](#).

Agreement to Issue Recipient Created Tax Invoice (RCTI) form

As the organisation is registered for GST, the following conditions will apply if the application is successful:

- The Grantee and The Department must be registered for GST when the Tax Invoice is issued;
- The Grantee will not issue a Tax Invoice in respect of the supply of services under this Agreement;
- The Grantee acknowledges that it is registered for GST and agrees to notify The Department if the Grantee ceases to be registered or if ceases to satisfy any of the requirements relating to Recipient Created Tax Invoices; and
- The Department acknowledges that it is registered for GST and agrees to notify The Grantee if The Department ceases to be registered or if it ceases to satisfy any of the requirements relating to Recipient Created Tax Invoices.

I understand that the above conditions apply, and that Multicultural Affairs Queensland will create an invoice on the organisation's behalf, if the application is successful. *

☐ Yes

Invoice

If the application is successful, Multicultural Affairs Queensland will request you to submit an **invoice** through SmartyGrants for the approved funding amount.

The invoice must **not** include GST.

2026-27 MCGP Category A

Form Preview

PLEASE SELECT THE "SAVE PROGRESS" OPTION BELOW AND THEN MOVE TO THE "NEXT PAGE"

Declaration and Feedback

* indicates a required field

Applicant Declaration

This section must be completed by an appropriately authorised person on behalf of the Applicant (may be different to the contact person listed earlier in this application form).

By submitting this application, I do solemnly and sincerely declare that: *

- ☐ the information given in this application is true and correct to the best of my knowledge, and will contact Multicultural Affairs Queensland immediately if any information changes or is found incorrect.
- ☐ I am duly authorised to submit this application on behalf of the applicant organisation.
- ☐ I have read, understood and agree to abide by the Funding Guidelines, the Terms and Conditions, including acknowledging funding with the placement of the Queensland Government crest on all marketing and promotional material.
- ☐ I understand that this is an application only and it may not result in funding approval.
- ☐ I understand the approved funding amount may be less than the requested funding amount, should this application be successful.
- ☐ I understand that the approved funding is one-off with no ongoing commitment of funding.
- ☐ I understand that the organisation must effect and maintain public liability insurance to the value of not less than \$10 million that covers the delivery of the project, and any other insurance as may be required.

At least 7 choices must be selected.

Authorised Person

The person authorised to submit this application

Name *

Title	First Name	Last Name

Position Title *

Must be at least 4 characters.
Enter in the full position title e.g. write Chief Executive Officer and not CEO

Phone Number

Insert area code before the number e.g. 07. Must be an Australian phone number and at least 10 characters.

Mobile Number

Must be an Australian phone number

2026-27 MCGP Category A

Form Preview

Email Address *

Must be an email address.

#Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button, please take a few moments to provide some feedback. The following questions will not be used to assess your application. Your response may be used help promote or support the overall evaluation of Multicultural Affairs Queensland's grants programs.

How did you hear about the opening of this funding round? *

- ☐ Email notification from Multicultural Affairs Queensland
- ☐ Department Website - <https://www.dwatsipm.qld.gov.au/our-work/multicultural-affairs/programs-initiatives>
- ☐ Multicultural Affairs Queensland's Facebook - <https://www.facebook.com/multiculturalqld/>
- ☐ Multicultural Affairs Queensland's Twitter - <https://twitter.com/MulticulturalQ>
- ☐ Queensland Government Media Statement
- ☐ Word of Mouth
- ☐ Other

How clear were the guidelines? *

- ☐ Very clear
- ☐ Somewhat clear
- ☐ Neutral
- ☐ Somewhat unclear
- ☐ Very unclear

So far, does the application process feel fair? *

- ☐ Yes
- ☐ No
- ☐ Unsure

Do you have any feedback about the fairness of the application so far?

Please indicate how you found the online application process *

- ☐ Very easy
- ☐ Easy
- ☐ Neutral
- ☐ Difficult
- ☐ Very difficult

How many minutes in total did it take you to complete this application? *

Must be a number.

Hint: Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

Subscribe to the Multicultural Affairs Queensland mailing list

If you would like to subscribe to the Multicultural Affairs Queensland mailing list to receive information on government funding, Multicultural Queensland Month and Awards, or Queensland Government information, you can [complete the mailing list form](#) and indicate your topics of interest.

IMPORTANT

Review your application before you can submit to ensure you have responded to all of the questions. If you are required to correct any errors in the form, you will be advised in RED and unable to select the **SUBMIT** button.

Once you have reviewed your application, you will need to select the **SUBMIT** button on the bottom of the page.

You will then receive a confirmation message on screen acknowledging that the application has been submitted. You will also receive a confirmation email with a PDF copy of the application attached.

I understand that if I do not receive these confirmations, the application has not been submitted and I will review the application for any highlighted errors and try again. *

☐ Yes