

Ripple Effect Grants 2025-26 application form

Form Preview

Eligibility

Before starting your application

Please read our guidelines to make sure your project meets our criteria: [Ripple Effect Grants Program Guidelines](#)

- Make sure you submit your application before or by the closing date - **5pm, Monday 24 March 2025**
- Incomplete applications and/or applications received after the closing date will not be considered
- Your project must be **completed by Monday 4 May 2026**.
- If you have any questions about our eligibility criteria, please contact **us on 1300 926 666 or rippleeffect@wannonwater.com.au**.

Confirm your eligibility

Does your project meet our criteria? See Ripple Effect Grants Program Guidelines

- ☐ Yes
- ☐ No
- ☐ Not sure (Please contact us before submitting your application)

Eligibility outcome

Thank you for your interest in our Ripple Effect grants program. It looks like your project may not be eligible to apply for our grants.

Please get in touch if you're unsure and would still like to apply - 1300 926 666 or rippleeffect@wannonwater.com.au

Applicant

*** indicates a required field**

Organisation details

Organisation name *

Organisation Name

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.

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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

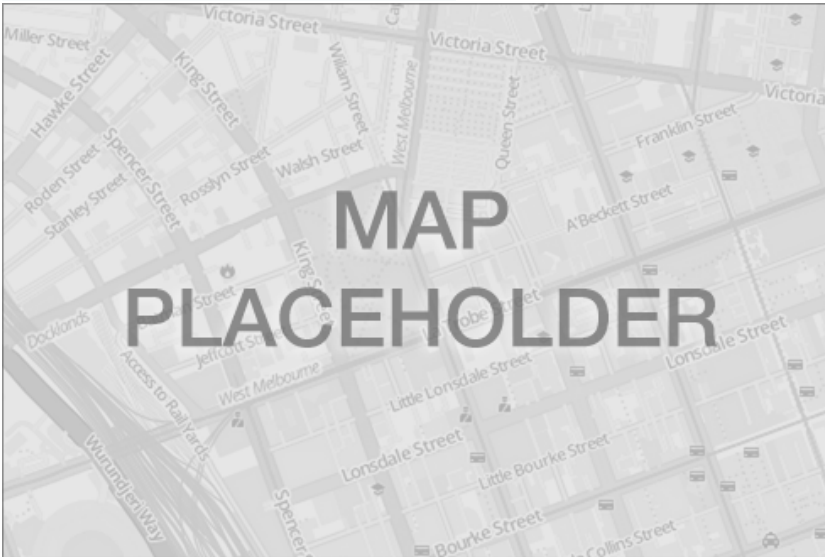
Tax Concessions

Main business location

Must be an ABN.

Organisation address *

Address



Primary address for the organisation, where is it located?

Postal Address *

Address

Email *

Must be an email address.

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Website

Must be a URL.

What does your organisation do? *

Word count:

Please provide a brief overview of the activities and programs you deliver (100 words max)

Contact details

Is the person applying for this grant the head of the organisation? *

- ☐ Yes
☐ No

Head of organisation (where different from application contact)

Name *

Title

First Name

Last Name

Position *

Phone *

Must be an Australian phone number.

Email *

Must be an email address.

Application contact

Name *

Organisation Name

Who will be our main point of contact for this application?

Position / title *

Phone number *

This is the number we will use to contact you about this application

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Email *

Must be an email address.

Organisational capacity

The following questions help us to understand if your organisation has the resources and support to deliver this project.

Please indicate which category mostly aligns with your organisation: *

Do you have a written letter of support ? (only necessary for projects where the activity will be carried out on property not owned by your organisation).

Attach a file:

Project concept - this section is worth 50% of your assessment score

* indicates a required field

Grant streams

You can apply for the following grant streams:

- School grant - Up to \$1,000
- International aid - Up to \$4,000
- Community grant - Up to \$5,000

Which grant stream are you applying for? *

Project title *

This is the title we will use to refer to your project from this point on.

Briefly describe your project, clearly stating what you'll do with the requested funding. *

Word count:

Please provide a statement of what your project intends to do and achieve (max 200 words)

Why does this work need to be done? *

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Word count:

What do you hope will change as a result of your project? What issue or community need are you trying to address? (max 200 words)

Start date *

Must be a date.

End date *

Must be a date.

Project Activities

Please list the activities you plan to deliver as part of your project.

List one per row.

Activity *

One per row. Add more rows if you want to list additional activities.

Location *

Address

Where will your activity occur? Leave blank if location is unknown or not relevant.

Start date *

Must be a date.
Leave blank if date is unknown or not relevant.

End date *

Must be a date.
Leave blank if date is unknown or not relevant.

Project Outcomes

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries of your project. Generally outcomes can be framed as an increase or decrease in one or more of the following:

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- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

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. 2, 5, 10 or 50 years after the activity).

- **If your project will have more than one outcome, use the 'Add More' button to list each one separately.**

Your project outcome *

Tell us what outcomes you expect to achieve through your project

Alignment with our strategic community priorities *

Please select the strategic community priority that best aligns with your project.

How will you measure your project outcome/s?

- We've included a list of indicators to measure any activities that would be funded as part of your project.
- **Please select at least one of the following to report against each project outcome.**

You can add multiple indicators by clicking the 'Add more' button.

Example:

- Indicator - increased volunteer participation
- Target - 100 participants
- Collection method - sign in sheet at event
- Explanatory notes - if further explanation or context is required

Indicator *

No more than 1 choice may be selected.
Which of our metrics (if any) will you track? You may be required to report on your progress. Add more rows if you want to list additional metrics.

Target *

Must be a number.

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Identify a target for the metric you have chosen - an estimated total for your project.

Collection method *

How will you collect and verify the data? E.g. survey, headcount, observation/estimation.

Explanatory notes (optional)

Add notes if you need to provide more context.

Who will benefit? - this section is worth 30% of your assessment score

Who are the primary beneficiaries of this project/program?

Which age group will most benefit from your project?

- | | |
|---|--------------------------------------|
| <input type="radio"/> Infants and early childhood | <input type="radio"/> Adults (26-64) |
| <input type="radio"/> Children (6-12) | <input type="radio"/> Seniors (65+) |
| <input type="radio"/> Adolescents (13-18) | <input type="radio"/> All age groups |
| <input type="radio"/> Young adults (19-25) | |

Which gender group will most benefit from your project?

- | | |
|---|---|
| <input type="radio"/> All males | <input type="radio"/> Equal male and female |
| <input type="radio"/> Majority males >60% | <input type="radio"/> Gender irrelevant |
| <input type="radio"/> All females | <input type="radio"/> Gender diverse |
| <input type="radio"/> Majority females >60% | |

Participation, inclusion and diversity

Priority will be given to projects that include and support a broad range of community members, including those who:

- Are experiencing financial vulnerability
- Are living with a disability
- Identify as Aboriginal and Torres Strait Islander
- Are culturally and linguistically diverse
- Are experiencing family violence

Will your project directly include any of these priority groups?

- ☐ Yes
☐ No
☐ Not sure

How will you address participation, inclusion and diversity?

Please describe how your project will address and encourage inclusive participation from at least one of the groups listed above?

Gender Equity

People of different genders may experience challenges in participating in community projects and activities.

We ask you to consider ways in which you can address barriers to participation to your project with a gender lens.

For information on the impact of gender, visit [Funding Centre | Applying a "gender lens" to your work](#)

Will your project address gender inequity?

- ☐ Yes
- ☐ No
- ☐ Don't know

How will your initiative address gender inequity?

How will you address the needs of people of different genders in the design and management of your initiative?

How will you measure the gender reach of your project/ program?

Project budget - this section is worth 20% of your assessment score

** indicates a required field*

Project funding

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Total Amount Requested *

\$

Must be a dollar amount.

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

Total Project Cost *

\$

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

Income and expenditure

Outline your project budget including details of other funding that has been confirmed and applied for. The budget MUST balance (total income = total expenditure).

INCOME - include ALL funding sources, including the amount requested in this application, other confirmed funding sources, contributions from your own organisation, unconfirmed funding and in-kind contributions. For in-kind contributions, please include an estimated value for non-cash contributions such as volunteer hours, services, equipment, time and materials)

EXPENDITURE - Breakdown of individual line items that describe how funds will be spent, i.e. purchase of equipment, hire of labour, booking fees, purchase of materials, transport costs etc.

Income	\$	Expenditure	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget totals

REMEMBER - Income MUST balance expenditure.

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

Project promotion

* indicates a required field

Promotion and dissemination

Recipients are required to acknowledge our support and use our corporate logo in all promotional materials. This can be done through your project/event advertising, website, and social media. Successful applicants will be provided with a copy of the Wannon Water corporate logo and brand guide to support this requirement.

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How will you share the story of your project and acknowledge Wannon Water's support? *

Do you agree that any photos or promotional material you send may be used by Wannon Water for communications purposes? *

- ☐ Yes ☐ No

We'd love to support you in promoting the success of your project. Do you agree to share three high-resolution images with us within five business days of the project completion? *

- ☐ Yes ☐ No

Does your event or project have an associated social media account?

- ☐ Facebook
☐ Instagram
☐ Other:

What is the address of your social media page?

Anything else?

Please attach any other files or photos that may be relevant to your application.

Attach a file:

Water and Sustainability Education

Each year our amazing Education team partners with a number of community organisations to deliver education sessions across the region.

Occasionally we share information about these opportunities and activities.

- ☐ Yes - please keep me in the loop about upcoming education opportunities
☐ Yes - my organisation is interested in taking part in an education session
☐ No - I wish to opt out of education information

Authorisation to submit

*** indicates a required field**

Authorisation details

This section must be completed by an appropriately authorised person on behalf of the applicant organisation.

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I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if my application is approved, my organisation will be required to accept the terms and conditions of the Ripple Effect grants program. *

☐ YES

☐ NO

Authorised person *

Title

First Name

Last Name

Position *

Contact Phone Number *

Date of submission *

Must be a date.

Feedback

Before you review your application and click SUBMIT please take a moment to provide feedback on the application process so far.

Please indicate how you have found the online application process *

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

How long did it take you to complete this application? *

How many minutes?

Please provide any suggestions for improvements and/or additions to the application process/form that you think we should consider

Where did you hear about our Ripple Effect Grants Program? *

☐ Facebook

☐ Instagram

☐ Wannon Water Website

☐ Word of mouth

☐ Wannon Water employee

☐ LinkedIn

☐ Enews

☐ Other:

