

ANZ Trustees Emergency Grants

Application (Accepted all year)

Name of Organisation
In what area of interest does this application fit? (Select <u>ONE</u> only)

- To provide emergency relief
- To contribute to disaster relief
- To support children in necessitous circumstances

ABN:	
Tax Status:	
<input type="checkbox"/> Tax Concession Charity (TCC)	<input type="checkbox"/> Health Promotion Charity
<input type="checkbox"/> Public Benevolent Institution	<input type="checkbox"/> DGR (Item 1)
<input type="checkbox"/> Charitable Institution	<input type="checkbox"/> DGR (Item 2)
<input type="checkbox"/> Charitable Fund	
Postal address:	
State:	
Post code:	
Phone:	
Web address:	
Project contact name:	
Position title:	
Phone:	
Email:	
Project title:	
Briefly describe the need, emergency and/or disaster you are trying to support through this work:	

How does the proposed work address this problem:

Expected outputs, outcomes and impacts*:

* Refer to Emergency program guidelines for more information

Amount of funding being sought (Max \$2,000):

Once you have completed all sections of the EOI Form
- you can save this file, **PRINT** a copy and then press **SUBMIT***

* By **SUBMITTING** this application to ANZ Trustees you acknowledge that you:
- are authorised by your organisation to make this application on its behalf and declare all the information provided is true and correct
- have read the terms and conditions for all grants managed by ANZ Trustees, including the Privacy Statement and Consent to use of Personal Information, and agree to those terms and conditions (Go to the FAQ section on the website, located at: <http://www.anz.com/personal/private-bank-trustees/trustees/granting/granting-programs/>).