

## Quit Victoria

### Multicultural Community Support Grants 2009

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Thank you for your interest in promoting the Quit and Smokefree messages to your community.

The purpose of this grant is to support groups or organisations from culturally diverse communities to organise a project that raises awareness of the health effects of smoking within their community.

#### Who can apply?

The community support grants are open to all multicultural community groups and organisations.

#### What can the grant be used for?

Grant money could be used for the following:

- Catering, venue/equipment hire, publicity, childcare, transport to venue, interpreter, entertainment, speakers etc.

The activity or event must be smokefree in indoor and outdoor areas.

#### What are the conditions of funding?

Quit's grants are small grants of \$500 designed to help a project get started or to complement projects that are already taking place.

Organisations are invited to work with Quit in projects that aim to:

- Raise the community's awareness of the effects of tobacco smoking on health.
- Increase understanding of exposure to secondhand smoking.
- Encourage and assist smokers to quit.
- Influence communities to adopt the Smokefree message.
- Raise awareness of Quit services available to CALD communities.

All groups will be required to complete an application form and an evaluation report of the project. Please read them carefully to make sure you collect and provide all the information needed.

#### When are grant applications due?

Grants applications must be returned to Quit's Multicultural Project no later than 13<sup>th</sup> February 2009. Projects need to be completed by 30<sup>th</sup> October 2009.

In addition to the grant, Quit can provide a variety of resources free of charge and bilingual educators are also available to assist if required.

Contact Quit's Multicultural Project on 9635 5502 to discuss your ideas.

APPLICATION FORM

Community Support Grants 2009

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**Contact details**

Name of group/organisation \_\_\_\_\_

Mailing address \_\_\_\_\_

Contact person 1 \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Contact person 2 \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Project details**

Name of the group \_\_\_\_\_

Target language \_\_\_\_\_

General Information about the participants i.e ethnicity, gender, age, smoking status etc

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When will you hold your event? (Must be between Feb and Oct 2009) \_\_\_\_\_

Where will the event/activity be held? \_\_\_\_\_

How do you intend to use the grant funds? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why is this initiative needed for your target group?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What type of activities will this grant fund?

- Please tick:
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Talk by Quit                                  | <input type="checkbox"/> Static display for World No Tobacco Day (WNTD) May 2009                 | <input type="checkbox"/> Staffed display for WNTD 2009                       |
| <input type="checkbox"/> Staff training on how to help smokers to quit | <input type="checkbox"/> Scholarship nominations for bi-lingual workers to become Quit educators | <input type="checkbox"/> Referrals to the Quitline using interpreter service |
| <input type="checkbox"/> Health Forum                                  | <input type="checkbox"/> Workshop  | <input type="checkbox"/> Community Survey                                    |
| <input type="checkbox"/> Quit articles in relevant Newsletters         | <input type="checkbox"/> Media promotion   | <input type="checkbox"/> Physical activity                                   |
| <input type="checkbox"/> Entertainment Activity                        | <input type="checkbox"/> Talk/Seminar by other   | <input type="checkbox"/> Others. Please explain.                             |

How many people will access Quit information through your project? \_\_\_\_\_

How will you evaluate your activity? (Please read the evaluation form carefully)  
i.e. Number of people attending, survey, etc.

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**Tax information – Please complete**

Organisation (to whom should the cheque be made out)

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Is this group/organisation registered for the GST?

- No    Yes

Does your group/organisation have an ABN?

- No    Yes – please provide \_\_\_\_\_

- **You must complete the details in this section to be able to receive your grant. Incomplete details will not be eligible for the full grant amount in accordance with Australian Tax laws.**

**Please return this form to:**

Verónica Ramos  
Multicultural Project  
Quit Victoria  
PO Box 888 CARLTON VIC