

COWAL PARTNERING PROGRAM APPLICATION FORM 2024

ORGANISATION INFORMATION

Organisation		
Postal Address		
Phone	Fax	Mobile
Email	Website	ABN (mandatory)
	•	

Organisation Contact Person		
Role		
Contact number	Email	

Is your Organisation / Group regis	stered for GST?		
Do you have either of the followin <i>Please provide documentation of a</i>	-		
DGR (Deductible Gift Recipient)]Yes 🗌 No		
TCC (Tax Concession Charity) Yes No			
Organisation Description			
 Incorporated Association Community Group Sporting Group 	 Charitable organisation Special interest group Government/local agency 	 Institution Other (please specify) 	

How long has the organisation been operating?	
Number of members/attendees (average)	
Are any members or attendees employed by Evolution?	Yes No
Please describe the organisation's main activities	



The organisation's operation bene	efits communities within the following	geographical locations
Forbes Shire	Lachlan Shire	Bland Shire
The organisation's operation prov	vides outcomes within the following ke	ey focus areas
Youth	Economic Development	Health and Wellbeing
Education	Environment	Arts, culture & sport
Other		

How does the organisation reflect the values of Evolution Mining?		
Safety		
Accountability		
Excellence		
Respect		

PROJECT INFORMATION

	Project Details	
Project Type		
An event A Program	An initiative Resourcing	Other Project
Project Title		
Description		
Please provide a summary of the proje	ect	
Project Outcomes		
Please outline the key outcomes of the	e project, with reference to the key focus	areas above.
Is there an opportunity for Evolution	Mining employee involvement?	Yes No
		Dage 2 of 4



Please specify	
Project Cost	
Project Budget	

	Funding/D	onation Requested		
Donation Type	Requested Contribution			
	Net amount			
	GST (if registered)			
	Total amount			
	Items	Net Cost	GST	Total Cost
Grant funding				
		TOTAL COST		
In-kind or material donation		/	I	
Other				

How will Evolution be recognised for its contribution to your initiative/event?



CHECKLIST

I have read and understood Evolution Mining's Cowal Partnering Program Guidelines before completing this
application.

I have com	nleted all r	equired	sections	of this	application	form
Thave com	pieteu all i	equireu	Sections	or this	application	101111

I understand and agree to provide an acquittal (close out form) within a month of the initiative/event completion, along with any relevant photographs and media clippings

I understand and agree to the terms of the Cowal Partnering Program, set out in the Program Guidelines

Support Materials

Please send copies, not originals, as materials sent in support of your application are not returned.

Submitting your Application

Signed and completed applications, marked attention Community Relations Team, must be submitted via email to: cgo.community@evolutionmining.com

DECLARATION

This declaration must be signed by a person with delegated authority.

I have read and understood the Evolution Mining Cowal Partnering Program Guidelines and I agree to the terms as outlined.

I declare that all information provided in this application is current and correct.

Signed:

Name:

Position:

Date: