

To the General Manager, Coffs Harbour City Council  
**GREEN SCHOOLS SUSTAINABILITY PROGRAM**

Locked Bag 155, Coffs Harbour 2450; DX 7559  
Administrative Centre, 2 Castle Street, Coffs Harbour  
Email: [coffs.council@chcc.nsw.gov.au](mailto:coffs.council@chcc.nsw.gov.au) Phone: (02) 6648 4000 Fax: (02) 6648 4199  
ABN 79 126 214 487



### 1. Details of the applicant

It is important that Council is able to contact you if more information is required. Please give as much detail as possible.

Mr  Ms  Mrs  Dr  Other:

Given name/s  Surname

Company/organisation  ABN

Postal address

Suburb or town  State  Postcode

Daytime telephone  Fax  Mobile

Email address

*The questions below are optional and the information will only be used for the purposes of providing better service.*

Place of birth:  Main language spoken:  Aboriginal or Torres Strait Islander:  Yes  No (Tick one)

Do you have special needs for assistance with this application?  Yes  No (Tick one)

If yes, please specify:

### 2. Further Contact Details

Name of School / Environmental Youth Group:

Project Name:

Project Coordinator / Environmental Contact

Best Day to Contact

Best Time of Day to Contact

Amount of funding you are seeking \$

In which School Year/s are the students?  Number of students directly involved in the project

Number of volunteers / community members who will be directly involved in project:

We hope to have the participation and collaboration of community members from the following groups:

### ABN and GST

Does your school have an Australian Business Number (ABN)?  Yes  No (Tick one)

If yes, please enter your ABN:

Is your school registered for GST?  Yes  No (Tick one)

#### 4. Project Background

Have you completed assessments/audits to identify areas for improvement at or near your school? If yes, what have you done? (eg. Energy, biodiversity, water, resources (including waste), food gardens, curriculum, A-team audit day ( and date))

Yes  No (Tick one)

Do you have a School Environment Management Plan (SEMP)?

Yes  No (Tick one)

Do you have a commitment to developing a SEMP in 2010

Yes  No (Tick one)

Visit <http://www.sustainableschools.nsw.edu.au/> to get started. Follow the Developing a Plan and Resource Centre

#### 5. Project Overview

Briefly describe your project or action (eg developing a vegetable garden, installing tap aerators on all taps or other sustainability measures, revegetating a degraded slope with native plants and trees, nesting boxes, introduction of energy saving measures,).

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Does / will this project fit in with the objectives of your SEMP?

Yes  No (Tick one)

Explain how this project links to your school / environmental group's Environmental Management Plan or how it will help your group / school to undertake an Environmental Management Plan?

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Explain how this project will engage students in environmental education activities and learning for sustainability.

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List the objective/s (eg. Protecting local biodiversity; reduce water consumption, reduce stormwater pollution, mitigating against climate change, by reducing energy consumption, reduce waste to landfill, linked to curriculum)

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List environmental education outcomes that this project will achieve and how it links with the school curriculum? (Integrated into class work, development of signs in creative arts or budgeting as part of maths etc, please mention relevant curriculum subject/s or programs).

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Does this project already have an environmental project plan that does not necessarily fall within a SEMP? Yes (please email [joelle.bridger@chcc.nsw.gov.au](mailto:joelle.bridger@chcc.nsw.gov.au))  No

Expected commencement date\*

Expected Completion Date

Works to be undertaken – please detail (examples of projects you could undertake include building of a compost area, removal of weeds; planting of a bush tucker garden, planting of a vegetable garden linked to canteen, changing of lighting to use low energy bulbs, waste avoidance in canteen or classrooms, biodiversity connectivity)

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## 5. Monitoring and Evaluation

*Projects should commence (at latest) by term one 2011*

How will you monitor the success of your project? (Eg compare water or electricity use prior to and after project; measure amount of recycling collected, eliminated erosion, amount of food produced for canteen, record the journey through photographs, media releases, and newsletters). Please note: Conditions of this funding are that you will be required to submit results of your evaluation.

How will this project improve the environment? (eg. Less greenhouse gas emissions, less waste to landfill)

How will this affect resource use within the school (Protecting local biodiversity; reduce water consumption, reduce stormwater pollution, mitigating against climate change, by reducing energy consumption, reduce waste to landfill, linked to curriculum)

Budget (Please itemise all expenses)

Item(s)	\$
Total Amount Requested	

## 6. Privacy and personal information protection notice

- this information is voluntarily required to process your request;
- your information will comprise part of a public register related to this purpose;
- your application will be retained in Council's Records Management System and disposed of in accordance with the Local Government Disposal Authority;
- your personal information can be accessed and corrected at any time by contacting this Council.

### Applicant's Signature/s

I declare that to the best of my knowledge all particulars supplied by me is correct and completed. I understand that inaccurate or false statements may cause my application to be delayed or rescinded.

As School Principal, I give permission for the implementation of the above project. I agree funds will be used for the project as stated above and if any significant alterations are made, I will advise Council in writing. I also understand as a condition of receiving funds, the school will submit a simple report upon completion of the project.

**Signature/s:** ..... **Date:** ...../...../.....

If you require further information to complete this application, please call  
Council Sustainability Education Officer on 6648 4643

Please return this application form to:  
Coffs Harbour City Council.

Land Use Health and Development  
Attention: Joelle Bridger  
Locked Bag 155  
COFFS HARBOUR NSW 2450  
Email: [joelle.bridger@chcc.nsw.gov.au](mailto:joelle.bridger@chcc.nsw.gov.au)

**Applications Close: 4.00 pm 1 September 2010**