FFV Masonic Grants 2024/2025
Form Preview

Applicant Details

* indicates a required field

Is the Masonic Order requesting support for local school awards *   ○ Yes   ○ No

I acknowledge that I have read and understand the guidelines on FFV's website. *   ○ Yes   ○ No

Masonic Order Contact Details

Representative *   Title   First Name   Last Name

Phone Number *

Mobile Number *

Contact Email *

Masonic Order Details

Name of Lodge	Lodge Number

Grant Details

How much is being contributing towards the project. * $
Must be a whole dollar amount and at least 0.

How much are you requesting from the FFV * $

This is the amount you are requesting from the Foundation. Please check the application guidelines on the website for the latest updates on granting.

Total Project Cost *

$ [   ]

Must be a whole dollar amount

If applicable, please attach relevant quotes to support the application.

Attach a file:

[   ]

Has the Application been approved by Members *

○ Yes   ○ No

Date Approved

[   ]

Must be a date - Please provide date if application has been approved by Members

Attach copy of Minutes

Attach a file:

[   ]

A copy of the minutes noting approval needs to be provided before a grant be reviewed.

Organisations Details

* indicates a required field

Organisations Contact Details

Organisations Name *

Organisation Name

[   ]

Legal Name of the Charity to which the grant will be made

Organisation's 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.

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	

Charity ABN Number

Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Organisations Website

Name of Contact *

Title	First Name	Last Name

Position Held *

Phone Number *

Mobile Phone Number

Contact Email *

Must be an email address

If applicable, please attach any support material

Attach a file:

Annual Report Website Link

Must be a URL

Charity Bank Account

Account Name

BSB Number   Account Number

Must be a valid Australian bank account format.
Funds will be paid directly to the nominated organisation. Funds will not be paid into a Lodge bank account.

Project Details

* indicates a required field

Project Details

Project Title *

Short project description *

Provide a short description of your project - what are you out to do?

Details of the specific purpose to which the funds would be applied. *

Submissions are more likely to be successful if they identify a particular project or item for which the grant is sought.

What impact will the funding have on the local community? *

Describe the specific issue or need you want to address.

If the application is successful, how will the recipient acknowledge the funding and support of Freemasons Foundation Victoria and how will the funding be publicised to the local community. *

I agree to use my best endeavours to obtain and provide supporting evidence to Freemasons Foundation Victoria confirming that the funds have been used for the project outlined above. This may include (if appropriate) photographs, media coverage or a letter of thanks from the recipient. *

○ Yes

Other Information

* indicates a required field

Conflict of Interest

A conflict of interest may arise if a member of the Masonic Order has a personal interest (including that of a friend or family member) that could conflict with the impartial assessment of this grant. Conflicts may be actual, potential or perceived. Although a conflict will not automatically prevent this application

being successful, all conflicts must be disclosed to Freemasons Foundation Victoria.

I confirm that the members of the Masonic Order have no actual, potential or perceived conflict of interest in relation to the assessment of this application. *

○ Yes, no member has an actual, potential or perceived conflict of interest in relation to this application

○ No, a member (s) has an actual, potential or perceived conflict of interest in relation to this application

Please provide details of any perceived conflict

How did the Masonic Order become aware of the organisation *

Is the organisation a local charitable organisation *

☐ Yes ☐ No

At least 1 choice and no more than 1 choice may be selected.

If no, why do you want to support the organisation

Publication of Grant

At the end of each month we will be publishing a list of grants approved. If the application is approved do you agree for the information to be included on the list? Note, in some instances you may want to inform the recipient of the grant at a presentation at a later date, if this is the case please select 'No'. *

○ Yes   ○ No

Declaration

* indicates a required field

Declaration and Privacy Statement

I certify that all details supplied in this application and in any attached documents are to the best of my knowledge true and correct and that the application has been submitted with the full knowledge and agreement of the Lodge. I confirm that the organisation that we wish to support have consented to providing their personal information to Freemasons Foundation Victoria and Freemasons Victoria in connection with this application.

I acknowledge that I have read Freemasons Foundation Victoria's privacy policy and consent to Freemasons Foundation Victoria collecting, using, handling and disclosing my personal information in accordance with Freemason Foundation Victoria's privacy policy.

I agree that I will contact Freemasons Foundation Victoria immediately if any information provided in this application changes or is incorrect.

I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge.

I am authorised to complete this application and have read and undertsood the declaration and privacy statement *   ○ Yes

Authorised Person's Name *

Position Held in Lodge *

Date of Declaration *

Must be a date.