# Licence Program 2021-2024 - Assessment Form

\*indicates a required field

## Assessor Declaration Form

Members of Council staff, and councillors assessing and determining applications for grants and donations should identify and manage any potential conflicts of interest in accordance with Council’s Code of Conduct and Ethical Governance: Conflicts of Interest Policy.

Members of Council staff and councillors need to ensure that any affiliation between them and the community organisation or association is appropriately managed when assessing and determining applications for Council's Recreation Facilities Licence Program 2021.

All assessors must declare if they have, or could be perceived to have, a conflict of interest.

If an assessor has something to personally gain from an application being either successful or unsuccessful, or if members of the public could have grounds to perceive that the assessor could personally gain from a decision, do not proceed to assess this application, instead please notify the Recreation Team.

**Conflict of Interest \* ** I DO NOT have a conflict of interest.

 I DO have a conflict of interest and cannot assess this application.

Assessor’s Name \*

Assessor’s Position \*

# Assessment of Application

## Program Eligibility

To be eligible the applicant must answer YES to all the program eligibility questions.

The organisation is a not-for-profit organisation and/ or community-based group \*

 Yes  No — does not meet eligibility

**The organisation targets at least 70% of the LGA \* ** Yes  No — does not meet eligibility

The organisation is located in the LGA and is  principally providing services to the residents

of Liverpool \*

The organisation has provided all required supporting  documentation, including public liability \*

Yes  No — does not meet eligibility

Yes  No — does not meet eligibility

## About the Applicant

Brief description of the applicant's history and/ or partnership with Liverpool Council \*

Does the organisation promote/encourage community participation? \*

## Proposed Recreation Facility

What site has been requested? \*

Is this the applicant the current tenant? \*  Yes  No

Based on the application is this a suitable site to operate the applicant’s program? \*

## Community Strategic Plan

Has the applicant demonstrated a need for their services and/or proposed projects/ programs at the requested site? \*

## Community Strategic Plan — Continued

Does the applicant services comply with Councils strategic

directions ? \*

How will their program help deliver Council's strategies? \*

Direction 1 Creating Connection

Direction 2 Strengthening and Protecting Our Environment Direction 3 Generating Opportunity

Direction 4 Leading Through Collaboration

Are the services inclusive to the residents of

Liverpool LGA? \*

How will the applicant engage / identify their audience? (eg: pathway to service: referral, no barrier? \*

Are the applicant's

services similar to others available in the area? \*

If the licence space is part of a multi-purpose centre, indicate whether the applicant's services complement the programs of other users.

Has the applicant demonstrated the financial capacity to run their

services? \*

In addition — Recreation team to include rent utilities of the licence space.

## Scoring

**YES** — Meets criterion weighting and % applies

**NO** — fails to address criterion and 0% applies

Evidence supplied validating legitimacy of organisational structure (weighting 5%) \*

Applicant has demonstrated alignment with one or more of strategic direction (weighting 20%) \*

Analysis completed to determine the need for the target audience (weighting 15%) \*

Demonstrated ability to manage community projects and programs (weighting 25%) \*

 Yes  No

 Yes  No

 Yes  No

 Yes  No

Evidence of partnership and programs delivered (weighting 5%) \*  Yes  No Full utilisation of facility (weighting 10%) \*  Yes  No Sustainability of organisation and programs (weighting 20%) \*  Yes  No

Scoring % total? \*

## Recommendation

Assessors' Recommendation? \*

Please give details to support your recommendation?\*

Date Completed \*