

# Li-Ve Fuller

## grant program application

### SECTION 1: Your contact details

Name	<input type="text"/>
Address	<input type="text"/>
Phone	<input type="text"/>
Email	<input type="text"/>

### SECTION 2: Your work

The organisation you work for	<input type="text"/>
Organisation's address	<input type="text"/>
Organisation's phone number	<input type="text"/>
Your role there	<input type="text"/>
How long have you worked in the disability sector?	<input type="text"/>

### SECTION 3: Your proposal

1. Which round of funding are you applying for?

2. What will you use the grant for?

*Example: I want to learn Tai Chi. I understand Tai Chi can be adapted for seated exercise and that there is a DVD series to help guide sessions and maintain the skills.*

3. What do you hope to achieve?

*Example: I'd like to run a weekly Tai Chi class for the people who attend the day activity centre where I work. Classes would be both seated and standing, so that as many people as possible could benefit.*

4. How will this benefit the person or people you support?

*Example: The participants have varying levels of ability and many have chronic pain. Tai Chi will help them to improve their balance, flexibility, concentration, breathing, independent movement, confidence and wellbeing.*



5. Why are you interested in this subject/activity?

*Example: I have done yoga for some years and use some of what I know at work but many people aren't able to get on the floor to do yoga. Tai Chi is a good alternative, particularly if I can learn and lead the seated program.*



6. What are the details of your plans? (Who? What? Where? When?)

*Example: There is a course starting at the Burnie Fitness Centre on 29 February. The course is in two parts – basic and advanced. Each course runs weekly for 10 weeks.*



7. How much money are you applying for and how will you spend it? (You can attach an extra page if you need to.)

Item	Cost (excluding GST)
<i>Example:</i>	
20 Tai Chi classes @ \$30 each	\$600
Set of Tai Chi DVDs	\$150
<b>TOTAL</b>	<b>\$750</b>

8. List any documents you are attaching or web addresses we should visit that *directly* support your application.

## SECTION 4: Supporting organisation

Ask your employer to complete this section.

Name of person supporting the application  
 Position (for example, manager, team leader)  
 Phone  
 Email


1. Why does your organisation support this application for Li-Ve Fuller funding?

2. How will your organisation support the applicant to undertake their project?

3. How will the organisation support the applicant to use their funding outcomes to benefit people living with disability?

Signed:

Dated:

### SECTION 5: Your declaration

All the information I am submitting as part of this application is true and correct.

Signed:

Dated:

### SUBMIT YOUR APPLICATION

Send your application and any attachments to us via:

- email at [contact@livefuller.gives](mailto:contact@livefuller.gives)
- post at: Li-Ve Fuller grant program, PO box 1003, Moonah, Tasmania, 7009

