Pathway to Growth -Expression of Interest
Form Preview

Application Form

Before starting this application, please discuss your project with a Council Visitor Events Officer and read the East Gippsland Pathways to Growth; - 12 Week Online Regional Event Management Training Program – Signature Program with Australian Centre for Regional Events Information and Application Guidelines available on the Council Events website . Click on Emerging Tourism Events Mentoring Program: Pathways to Growth.

By proceeding, you can confirm that your event meets the requirements outlined in the Expression of Interest.

All fields are required.

Applicant Details

Contact Details

Full Name

Position

Email

Must be an email address.

Phone Number

Must be an Australian phone number.

Address
Address

If successful, will you be the contact for your event.
○ Yes
○ No

Organisation Details

Organisation Name

<div style="border: 1px solid #ccc; height: 3em;"></div>

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	

Must be an ABN.

Address
Address

Email

Must be an email address.

Phone Number

Must be an Australian phone number.

Website

Must be a URL.

If you are entering an auspice agreement to deliver project, enter details here

Event Details

Event Name

Please provide a brief description of your event, including its goals, target audience, and key activities.

maximum 200 words

How many years has your event been running?

Is your event unique to East Gippsland.
○ Yes
○ No

Event Date/s

if date unknown, please provide an estimated month or time of year

Duration of Your Event

how many days does your event go for

Event Location/s

if venue or site name is unknown, please provide town name

How would you categorise your event?

for example food & wine, arts & culture, agriculture, trade, sport, business & forum and exhibitions

Selection Criteria

What specific skills or areas of knowledge do you hope to gain from this training program? (e.g., marketing, logistics, budgeting, stakeholder engagement)

The program requires active participation in weekly online sessions and completion of assignments. Can you commit to attending all sessions and completing program requirements over the 7-week period?

○ Yes
○ No

Do you have access to reliable internet and the necessary technology (e.g. a computer with video capabilities) to fully participate in the online training?

☐ Yes
☐ No

How many people in your organisation would be interested in participating in this training.

Must be a number.

Who from your organisation will participate in the training program? Please indicate whether they are volunteers, paid staff, or contractors, and briefly describe their roles in the event (e.g., event coordinator, marketing, logistics, volunteer management).

Where do you see your event in the next 2–3 years, and how do you think this training program could help you reach those goals?

Budget

Please provide a budget summary for your next event in the table below.

In your budget, include the following:

- **Estimated Income and Expenditure**, detailing:
  - Financial support you have received or applied for, such as business sponsorships or funding grants. (Please identify these as confirmed or unconfirmed).
  - Cash contributions.
  - In-kind support. Ensure that in-kind income is matched with in-kind expenditure. For instance, if a volunteer provides in-kind labor (income), calculate the total hours contributed and multiply it by the standard rate for the type of work done. Record this same amount under in-kind expenditure.

A budget template can be found on the Council Events webpage under the Events Management Toolkit.

Budget Summary

Please summarise your budget in typical budget groups for example business sponsorship, marketing and consultant fees.

Income	$	Expenditure	$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$
	$		$

Budget Totals

Total Income Amount

$

This number/amount is calculated.

Total Expenditure Amount

$

This number/amount is calculated.

Income - Expenditure

$

This number/amount is calculated.

Please provide any additional comments about your budget here.