**Inclusive Neighbourhoods: Application form**

Please read the *Inclusive Neighbourhoods* briefing document and grant guidelines before completing this form.

1. **About your organisation**

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| **1.1 Your organisation** |
| Organisation name: |  |
| Organisation ABN: |  |
| Organisation registered address: |  |
| Organisation website:  |  |
| Is your organisation GST registered?  | Yes/No |
| Your organisation’s work*Please provide a brief description of your organisation and the work it does.*  |
|  |
| **1.2 Primary contact person** |
| Name: |  |
| Role in organisation |  |
| Email: |  |
| Phone number: |  |
| **1.3 Alternate contact person** |
| Name: |  |
| Role in organisation |  |
| Email: |  |
| Phone number: |  |
| * 1. **Your organisation’s experience**

*Please provide brief details of your organisation’s experience relevant to this grant application. This should include any experience relevant to inclusive neighbourhoods, your experience in delivering fixed-term grant funded projects and any relevant policy or advocacy experience.*  |
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| * 1. **Inclusion**

*Please describe how people living with disability are involved in your organisation’s governance, management, and service design and delivery?* |
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1. **About your project**

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| **2.1 Project name***Please give a brief name for your project.* |
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| **2.2 Project description** |
| * Purpose: Why are you doing this project?

*Please describe what you are trying to achieve through this project* |
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| * Community: Who will you work with?

*Please describe the community of people that your project will work with and who will benefit from the project*  |
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| * Location: Where will your project work?

*Please describe the geographical area where your project will take place* |
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| * Activity: What will your project do?

*Please describe the key activities of your project. Please include the sequence of timing of the activities.*  |
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| * 1. **Outcomes: What difference will your project make?**

*Please describe the changes that you expect your project to make for the community or for individuals taking part in your project. Please describe the outcome, how your project will achieve it and how you will know you’ve achieved it (i.e. what measures you will put in place).**Our grant guidelines provide further information on project outcomes.* |
| Outcome 1: |  |
| Achieved through: |  |
| Measured by: |  |
| Outcome 2: |  |
| Achieved through: |  |
| Measured by: |  |
| Outcome 3: |  |
| Achieved through: |  |
| Measured by: |  |
| * 1. **Resources: How will you deliver your project?**

*What people and resources will you use to run your project?* |
| People: *Who will be responsible for leading your project? What is their role in your organisation and their relevant experience? If you are reliant on external stakeholders to provide resource into the project, please provide details of this arrangement.*  |
|  |
| Resources: *What other resources will you need to run your project? This could include venues, digital resources etc. If you are reliant on external stakeholders to provide resource into the project, please provide details of this arrangement.*  |
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| Input from Julia Farr group: *Are you looking for support from us, beyond the grant itself? This could include via a project steering group, codesign, coaching, policy and advocacy support etc.* |
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| * 1. **Exit: What will happen to your project at the end of the grant?**

*Please explain how you will either conclude your project at the end of the grant funding, or secure alternative funding.*  |
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1. **Your project budget**

Please include project costs, excluding GST

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| --- | --- | --- | --- |
|  |  | **FY 22/23** | **FY 23/24** |
| Salaries | Include salaries and on-costs |  |  |
| Set up costs | Include costs to establish your project, such as recruitment and training |  |  |
| Operating costs | Include day to day operating costs such as communications, travel etc |  |  |
| Contribution to overheads | Include contribution to organisation overheads such as accommodation, management, IT etc  |  |  |
| Events | Include the costs of running events, workshops etc |  |  |
| Participation fees | Include any gifts or honoraria to support people to participate |  |  |
| Marketing | Include any marketing expenses |  |  |
| Monitoring and evaluation | Include project-specific costs for collecting data  |  |  |
| Capital expenditure | Include costs for the physical resources to support project delivery (e.g. laptops) |  |  |
| Other | If you have identified any other project costs not listed above, please include them here and describe them in a note below.  |  |  |
| **Total** |  |  |  |
| Amount of grant requested |  |  |  |

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| If your grant request includes salaries, please provide role titles and full time equivalent for each role. Please identify if these are new roles or if the work will be undertaken by existing staff.  |
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| If your grant request is less than the total project cost, please explain how the remaining costs will be funded.  |
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| Please identify any other agency that is already funding this, or similar, work in your organisation. |
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| Please add any additional comments on your budget.  |
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1. **Supporting information**

Please provide the following information with your completed application:

* Certificate of incorporation
* Your most recent audited annual financial report
* Certificates of currency for relevant insurances, including public liability and workcover
* Contact details for two referees. We will contact these referees to confirm information about your organisation and its work.

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| --- |
| Referee 1 |
| Name |  |
| Relationship to applicant |  |
| Contact email |  |
| Contact phone number |  |
| Referee 2 |
| Name |  |
| Relationship to applicant |  |
| Contact email |  |
| Contact phone number |  |

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| Where did you hear about this grant opportunity? *(This will not affect the assessment of your application, but helps us to understand how best to promote our grant programs).*  |
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| Signed |  |
| Date |  |

Completed applications and supporting information should be sent to:

grants@juliafarr.org.au