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| Aboriginal Youth Engagement Grants |
| * Application Form
 |

### Eligibility

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| **Are you:** |  |
| 1. An Aboriginal Community Controlled Organisation
 | Yes / No  |
| 1. An Aboriginal organisation
 | Yes / No  |
| 1. An Aboriginal-led community, not-for-profit or peak community body based in Victoria
 | Yes / No  |
| *You must answer ‘yes’ to at least one of points 1-3 to be eligible for these grants.* |
| **And:** |  |
| 1. Are you incorporated under the Corporations Act 2001 (Cth), the Associations Incorporation Reform Act 2001 (Vic) or a similar type of organisation?
 | Yes / No  |
| 1. Do you have a current Australian Business Number (ABN)?
 | Yes / No  |
| 1. Do you have sufficient Public Liability Insurance to cover all aspects of the program?
 | Yes / No  |
| 1. Do you have any overdue deliverables from other grants with the Victorian Government?
 | Yes / No  |
| 1. Are you already funded through the Marram Nganyin Aboriginal Youth Mentoring Program?
 | Yes / No  |

*You should answer ‘yes’ to points 4-6 and ‘no’ to points 7-8 to be eligible for these grants.*

### Organisation details

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| Name of organisation: |
| Organisation web address (if available): |
| Organisation ABN: |
| Organisation street address: |
| Town/suburb: |
| State: Victoria |
| Local Government Area: |
| Is the postal address the same as the physical? |
| **Organisational Postal Address (do not complete if same as street address)** |
| Postal Address: |
| Town/Suburb: |
| State: |
| Postcode:  |

### Contact details

|  |
| --- |
| Title: |
| First Name:  |
| Last Name: |
| Position: |
| Telephone: |
| Email: |

### Activity Details

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| Activity Name:  |
| Funding request amount: |
| Activity start date: |
| Activity end date: |

# Assessment Criteria

Selection Criteria 1: What types of activities does your organisation deliver?

Words: **100**; Weighting: **10%**

Please include:

* a description of your organisation, including your primary purpose and the things you do.

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| *Write response here*  |

Selection Criteria 2: What needs have been identified for/by the young people you work with?

Words: **500**; Weighting: **25%**

Please include:

* context, challenges and needs of the young people you work with
* how you know that these are the needs of these young people (consider: consultation, current work with young people, observation of young people in community).

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| *Write response here*  |

Selection Criteria 3: What are you going to do?

Words: **500**; Weighting: **20%**

Please provide a detailed action plan that clearly outlines the proposed activities by describing:

* the activities that will be delivered
* the role of young people in identifying these activities
* the timelines for the activities within the grant period
* your readiness to proceed with the activities
* COVID-19 safe requirements in place.

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| *Write response here*  |

Selection Criteria 4: Who is involved?

Words: **300**; Weighting: **10%**

Please outline who will be involved, the role they will play and the skills they will bring including:

* project coordinators and individuals responsible program tasks
* partner organisations and their roles
* Elders, community members or volunteers and their roles in the activities.

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| *Write response here*  |

Selection Criteria 5: What will the proposed activities achieve?

Words: **500**; Weighting: **25%**

Please demonstrate:

* alignment of the activities with the program objectives (see above)
* alignment with the strategic direction of your organisation
* the extent to which the proposed activities address young people's needs.

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| *Write response here*  |

Selection Criteria 6: How will you measure your success?

Words: **300**; Weighting **10%**

* How will you measure whether you achieved what you set out to achieve?
* What methods will you use to collect data?
* How will the story of young people's participation and achievements in the project be told?

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| *Write response here*  |

# Program Budget

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| INCOME | EXPENDITURE |
| Grant Amount requested from the Department $ |  | Administration Overheads: ($) |  |
|  |  | Advertising/event promotion:($) |  |
|  |  | Event equipment: ($) |  |
|  |  | Venue/meeting room hire ($): |  |
|  |  | Other 1: ($)Description other |  |
|  |
|  |  | Other 2: ($)Description other |  |
|  |
|  |  | Other 3: ($)Description other |  |
|  |
|  |  | Other 4: ($)Description other |  |
|  |  | **Total Expenditure ($)** |  |

*Please note that the grant requested from the Department and the total expenditure must be the same.*

# Supporting Documentation

Please upload the following **mandatory** supporting documents. Missing documents will defer the assessment of your application.

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| [ ]  | Certificate of Incorporation or Business Registration Certificate |
| [ ]  | Copy of your Certificate of Currency for the organisation’s Public Liability Insurance. |

Please upload the following documents to support your application where relevant.

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| [ ]  | Project timeline |
| [ ]  | Support letters from project partners, where relevant, and details of what partners will contribute to the project and the role they will play. |

#### Communication and Declaration

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| **Use of your information:**Any personal information provided will be handled in accordance with the Privacy and Data Protection Act 2014 (Vic) and applicable privacy laws.Enquiries about access to personal information held by DFFH should be directed to the Office of the Victorian Information Commissioner, Privacy and Data Collection at PO Box 24274, Melbourne VIC 3001.Information provided to the Office for Youth in this application form may be used to contact you about your application and assist us to assess your eligibility for funding.If your grant application is successful, your organisation name, event description, amount awarded and duration of grant may be published or described on Youth Central or other Victorian Government websites or publications.**Office for Youth mailing list:**Information provided to the Office for Youth may be used by the Office for Youth or DFFH to compile mailing lists of Aboriginal organisations in Victoria for the purposes of sending notices or updates on topics of interest such as other funding opportunities, information on community consultations, policy, programs and legislative announcements. If you wish to be removed from this mailing list, please contact the Office for Youth at youth@dffh.vic.gov.au.**Sharing of your information:**Information provided to the Office for Youth may be shared with other government departments, ministerial offices and members of Parliament for the purposes of sending notices or updates on topics of interest such as other funding opportunities, information on community consultations, policy, programs and legislative announcements. If you do not wish for your details to be shared with other Victorian government departments, ministerial offices and Members of Parliament, please email the Office for Youth at youth@dffh.vic.gov.au **Declaration:*** I state that the information in this application and attachments is to the best of my knowledge true and correct. I will notify the Office for Youth of any changes to this information and any circumstances that may affect this application.
* I state that the applicant organisation has acquitted all previous grants and provided relevant reports.
* I acknowledge that this application may be referred to external experts or other Government Departments for assessment, reporting, advice, comment or for discussions regarding alternative or collaborative grant funding opportunities.
* I understand that the Office for Youth and DFFH are subject to the Freedom of Information Act 1982 and that if a Freedom of Information request is made the Office for Youth is required to comply and provide all requested information.

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| Agree:  |  |
| Name of Organisation:  |  |
| Name:  |  |
| Position/Role:  |  |
| Date:  |  |

(To be submitted by a person with delegated authority to apply, or with the support of a delegated authority - i.e. Chairperson, Secretary, Public Officer or Treasurer) |