|  |  |
| --- | --- |
| **Information Linkages and Capacity Building (ILC)** |  |
| **Information Linkages and Capacity Building (ILC) Economic Participation of People with Disability– Grant Round 2019-20** | |
| **Auspice Authorisation Form** | |

This form must be completed and attached for all applications submitted under an auspice arrangement.

The form is used by grant assessors to check that the Auspicee has authorised the Auspicor to submit the application.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Name and details of Auspicor** *(the organisation applying on behalf of the organisation delivering the project.)* | | | |
| **Organisation Name:** |  | | |
| **Contact Address:** |  | | |
| **Contact Person:** |  | **Position:** |  |

|  |  |
| --- | --- |
| 1. **Name and details of Auspicee** *(the organisation delivering the project)* | |
| **Organisation Name:** |  |
| **Contact Address:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Declaration**  By signing and submitting this form you acknowledge and declare that:   * the organisation listed as the Auspicor in this form is authorised to submit an application to the NDIA, *Information Linkages and Capacity Building (ILC) Economic Participation of People with Disability– Grant Round 2019-20* on behalf of the organisation listed in this form as the Auspicee; * if the Auspicor is successful in its application, the Auspicor will receive funding and enter into a grant agreement on behalf of the Auspicee; * you are authorised to authorise the Auspicor to submit the application on behalf of the Auspicee; and * if the Auspicor is successful in its application, the Auspicee and Auspicor will enter into a legally binding auspicing agreement. | | | | |
| **Signed by a duly appointed representative of the Auspicee organisation** | | | | |
| **Name:** |  | **Position in Organisation:** | |  |
| **Signature:** |  | | **Date:** |  |