**Application Information**

These grants will support innovative projects that equip farmers and agricultural-dependant communities and businesses with the tools and capability to adapt, reorganise, transition and or transform in preparation for drought conditions such as changing temperature, increasing variability and scarcity of rainfall, and changed seasonality of rainfall.

Three grants types are available in this EOI and grants opportunity:

* **Ideas Grants** will provide $50,000 (GST Inclusive) for one year.
* **Proof-of-Concept Grants** will provide funding of up to $120,000 (GST Inclusive) for one year.
* **Innovation Grants** will provide funding of between $300,000 to$1.1 million (GST Inclusive) per year for a maximum of 3 years.

This grant opportunity will run through a2-part process.

You can express interest in an Innovation Grant, Proof-of-Concept, or an Ideas Grant. You may submit more than one application. Separate projects need a separate application form.

The EOI process will be used to move applications into appropriate funding streams to support merit worthy proposals of varying scale and development, and to manage risk.

If your proposal is assessed as suitable in the EOI process for an Innovation Grant or a Proof-of-Concept Grant you will be invited to apply for these through a targeted competitive grant round.

If your proposal is assessed as suitable in the EOI process for an Ideas Grant you will be offered this grant based on your EOI.

**Community Grants Hubs**

This grant round is being administered by the Community Grants Hub on behalf of the Department of Agriculture, Water and the Environment.

**Closing Date/Time**

Applications must be submitted by 9:00pm Australian Eastern Standard Time (AEST) Wednesday 8 September 2021.

**Making Sure Your Application is Saved**

Upon exiting the form please ensure that you use the ‘Save and Exit’ button. The ‘Continue’ button should only be used as you intend to progress through the form. For your Application to be saved when exiting, you will need to click on:

* ‘Save and Exit’, and
* ‘Confirm’.

You will know that your application is saved when you are taken from the current form process to the ‘Form Saved’ page.

Note that the ‘Save and Exit’ button will ask that you ‘Confirm’ that you wish to save the Application, which you must do to complete the save process. If this is not done, your Application will not be saved.

You can return to your Application with the data saved using the link on the ‘Form Saved’ page that says ‘Click here to return to your form’ and confirming your submission reference ID details.

**Grant Opportunity Documents**

Read all information in the Grant Opportunity Documents before completing this Application Form. The Grant Opportunity Documents are available on the Grant Connect (https://www.grants.gov.au) and Community Grants Hub (http://communitygrants.gov.au) websites. Applications will be assessed using the process outlined in the Guidelines.

**Application Help**

Information about the Application process is available on Grant Connect (https://www.grants.gov.au) and Community Grants Hub (http://communitygrants.gov.au) websites.

Applicants must submit any questions relating to the Program or this Application process in writing to support@communitygrants.gov.au

Applicants may submit these questions up until five business days prior to the Closing Time and Date. A response will be provided within five business days.

Applicants may be direct any general enquires, requests for technical help or support in using and/or submitting the Application Form by:

* Phone 1800020283
* Email to support@communitygrants.gov.au

**Attachment Limits**

This Application Form allows users to attached files to support their application, where directed to do so. The maximum size for individual attachments is no larger then 2MB and the form will not accept individual attachments above this size. Please plan to modify your attachment files accordingly if necessary.

**Accepted file types:**

.bmp, .doc and .docx, .gif, .jpeg, .Jpg, .msg, .pdf, .png, .pps, .pptx, .txt, .xlsb, .xlsx.

**Note:** Compressed files, such as .zip, .rar, are not accepted and foreign characters should not be used in the files names.

**Sharing this Form**

More than one person should not access this form at the same time. If this is done there is a risk that information entered in the form may be lost and not transferred upon submission. If you wish to share this form and access details, please ensure that only one user edits the form at any given time.

To avoid any issues with your submission, ensure each contributor has completed their updates, saved their changes and exited the form prior to another person accessing the same form.

**Submission Reference ID**

Each Application Form is attached a unique Submission Reference ID. Each time this Application is accessed you will be required to use this Submission Reference ID.

**Submitting Application Form**

Once you have completed this Application Form, you must submit it electronically by using the submission section at the end of the form.

Please note: there may be short, scheduled outages to systems as part of regular information maintenance that may affect submission of this form. Notification of these outages will be on the website.

Note: Applications will be assessed using the process outlines in the Grant Opportunity Documents. Applicants will be notified of the grant funding outcome on completion of the assessment process.

**National Relay Service (NRS)**

The Community Grants Hub uses the NRS to ensure our contact numbers are accessible to people who are deaf or have a hearing or speech impairment. Please phone 1800555677 to access the NRS.

**Australian Tax Office Reporting**

The Department will need to report details of payments made to the Australian Taxation Office (ATO) as part of the taxable reporting obligations for the government entities.

In general terms, the types of payments to be reported to the ATO are:

* Payments made for grants to entities with an Australian Business Number (ABN);
* Payments made for services.

If you receive a payment from the Department that meets the ATO criteria it will be reported to the ATO as part of the *Taxable payments annual report*.

Further information is available on the Australian Taxation Office(http://www.ato.gov.au/) website.

**Privacy**

The Community Grants Hub uses an integrated Smartform service assisted by the Department of Industry, Science, Energy and Resources on www.business.gov.au

If you are providing information to access a non-Department of Industry, Science, Energy and Resources program, that information will not be accessed by Department of Industry, Science, Energy and Resources employees. The only exception to this is where Senior Analysts will only access the data with permission and at the request of client agencies.

The Community Grants Hub will be able to access the Application as part of the form support services.

By submitting the Application you acknowledge that the information provided in the Application may be shared with other Commonwealth and law enforcement agencies for the prevention and detection of fraud.

For more information about how the Department of Industry, Science, Energy and Resources protects your privacy and personal information, please see the Department of Industry, Science, Energy and Resources’ Privacy Policy(https://www.business.gov.au/legal-notices/privacy). The Community Grants Hub Privacy Policy (Http://www.communitygrants.gov.au/privacy) and WCaG Accessibility http://www.communitygrants.gov.au/accessibility). Information and the Department of Agriculture, Water and the Environment Privacy Policy (https://www.awe.gov.au/about/commitment/privacy) should also be read and understood.

**Use of Information**

Your email address:

Confirm your email address:

**Use of Information**

The Community Grants Hub may use the information, other than personal information, provided in this Application Form to assist it to:

* Comply with the Australian Government requirement to publish the details of all grant recipients on the GrantConnect website.
* Inform staff negotiating and establishing Grant Agreements of risks and issues that need to be addressed in the Grant Agreement for the program, and/or
* Inform future assessments for Applications.

All information including personal information provided in this Application may be shared with the other Commonwealth and law enforcement agencies for the purpose of preventing and detecting fraud. This includes personal information of any third party provided in this Application.

You can only apply if you agree to the use of the information you provide in this for the purposes listed above.

Check this box if you agree to the use of the information you provide in this Application Form.

I agree

**Existing Grant Recipient**

**Is the Applicant an existing Grant Recipient?**

You must respond to this question.

Select ‘No’ if the Applicant is not an existing recipient of a grant through the Community Grants Hub.

Select ‘Yes’ if the Applicant is an existing recipient of a grant through the Community Grants Hub. If yes is selected you then must enter your organisation ID number in the next field. The Applicant’s organisation ID number should be entered as it appears on the Grant Agreement. After entering the organisation ID, click on the ‘Search’ button to validate the ID to bring back key organisation details for this Application. Should there be any issues with validation a message will be returned to give a choice on actions to progress. If you require assistance please call 1800020283.

Yes No

If Yes, provide the organisation ID number as it appears on you Grant Agreement and then click ‘Verify number’ to confirm the details are correct.

Tip: Copy and paste the organisation ID number for the Grant Agreement to avoid errors.

Organisation ID:

Applicant Legal Name:

Registered Business Name:

Entity Type ABN

State Postcode

GST Registered Charity

**Are updates required to the Applicant’s details?**

You must respond to this question.

Select ‘No’ if updates are not required to the Application’s details as currently held by the Community Grants Hub.

Select ‘Yes’ if updates are required to the Applicant’s details as currently held by the Community Grants Hub. You will be required to contact your Funding Arrangement Manager to update your details.

Yes No

**Eligibility Requirements**

**What is the Applicant’s entity type?**

For a list of eligible entity types, refer to the Guidelines.

If you are unsure about the Applicant’s entity type, please seek professional advice (e.g. from your lawyer or accountant) or refer to the Australian Business Register website for further information.

You must respond to this question. Choose the entity type that is relevant to the Application from the list.

NOTE: Use the field’s scroll-bar or the keyboard’s down-arrow to view all available options.

**Is the Applicant able to provide documentation to support the entity type?**

You must respond to this question. At least one attachment must be provided if the response to “Is the Applicant able to provide documentation to support the entity type?” was ‘Yes’.

Select ‘No’ if the Applicant is not able to provide documentation to support the entity type.

Select ‘Yes’ if the Applicant is able to provide documentation to support the entity type. If ‘Yes’ is selected click the ‘Click to Upload’ button toad the file in each attachment section and the click the ‘Add Attachment’ button to add sections for subsequent attachments. Note: the maximum file is 2mb and the overall form has the capacity to take 15MB of attachments in total. Once a file has been uploaded or an attachment section has been added select the appropriate ‘X’ symbol button to delete.

NOTE: This is a maximum of 2 attachments for this question if the response if ‘Yes’.

Yes No

**Are you a university?**

**A registered higher education provides for the purposes of the Tertiary Education Quality and Standards Agency Act 2011 (Cth) that is registered in a provider category that permits the use of the word university.**

You must respond to this question.

Please select the most appropriate option.

Yes

No

**Grant Type**

**What grant are you applying for?**

You must respond to this question.

Please select the most appropriate option.

Ideas Grant

Proof-of-Concept

Innovation Grants

**Investment priorities**

**Please select the funding priorities your project will address.**

1A Climate-smart agriculture

1B Drought resilience strategies and practices

2A Resilient Agriculture Landscapes

3A Community wellbeing

4A Understanding interconnections

4B Knowledge and Research Synthesis

4C Improved monitoring and evaluation

4D Financial instruments

4E Blue Sky Opportunities

**Is this project innovative and different from previous activities?**

**If so, how is this project innovative and different from previous activities?**

You must respond to this question.

This field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

Yes

No

Provide your response.

**Limit**: **approx. 150 words, 1000 characters**

**Have you previously undertaken a similar project?**

You must respond to this question.

Please select the most appropriate option.

Yes

No

**Fields of activity**

**What are the field(s) of endeavour that the project will cover?**

You must respond to this question.

Please select the options that apply.

Mathematical Sciences

Chemical Sciences

Earth Sciences

Environmental Sciences

Biological Sciences

Agriculture and Veterinary Sciences

Information and Computing Sciences

Engineering

Technology (e.g. Agricultural Biotechnology, Environmental Biotechnology)

Built Environment

Design and Regional Planning

Education

Studies in Human Society (e.g. Anthropology and Demography) and or cultural studies

Unsure

**Other fields of endeavour**

**Will the project cover a field of endeavour not listed above?**

You must respond to this question.

This field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

Yes

No

Provide your response. (Limit: approx. 150 words, 1000 characters)

**Project/Activity Details**

**Provide a short title of your Application for this Project/Activity.**

You must respond to this question. 250 character limit.

This field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

**Limit: 250 characters.**

**Provide a brief description of your project or the services to be delivers and how it will contribute to the objectives outlines in the Grant Opportunity Guidelines.**

You must respond to this question. 1000 character limit (approximately 150 words) The character count includes letters, numbers, spaces, paragraph marks, bullet points etc.

Note: In this field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

Question Instructions:

* The response should be easy to understand and written in plain English. Try not to use technical term, acronyms or ingo,
* Your response should be a stand-alone summary of your project or explain how you will implement the services detailed in the Grant Opportunity Guidelines.
* The description may be used as part of our application review and may be copied or published for reporting or grant agreement purposes.

Example: Our organisation intends to provide a free weekly language group for newly arrived migrants to assist them in building their English language skills and connect with other migrants in a similar situation. By improving the language skills of newly arrived migrants the hope is that these migrants will be better equipped to access job opportunities, find accommodation, navigate their local area, access community services and engage with the community.

**Limit: approx. 150 words, 1000 characters)**

**In which service area/s is the Applicant proposing to deliver the Project/Activity?**

**Instructions:**

* The Service Area Type field below indicates the areas used in this Application form.
* If applicable, select a State to refine the available service area values.
* A list of values will appear in the Available service area/s for selection. Choose the appropriate value/s and click Add to insert the highlighted value/s into the Chosen service area/s. Repeat the process as required.

**IMPORTANT NOTE:**

The form only allow 40 service areas available for selection. If you wish to apply for more services areas, a separate form/s will need to be completed.

**Tips:**

* To choose multiple values to add at one time, use Shift+Left+Click to select a group of values, or use
* Ctrl+Left+Click to select a range of alternating values, and then click the Plus symbol
* To delete from the ‘chosen service area/s’, highlight the value in the box on the right and click the Minus symbol.

**Service Area/s**

**Location of Project**

**Provide details of the location where the project will be delivered.**

You must respond to this question.

The physical address must be completed in full. For example: Level 1 Main Building 220 Business Street Regional City VIC 3630

Location Name

Floor / Building: Unit: Apartment

Street number, name and type

Suburb/Town State Postcode

**Project Design**

**Please outline who is going to undertake what activities and by when.**

You must respond to this question.

Note: In this field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

**Limit: approx. 525 words, 3500 characters**

**Financials**

**Provide a breakdown of the proposed grant funding by chosen service area/s.**

You must complete a separate row for each chosen service area.

Please note that you must complete the ‘In which service area/s is the Applicant proposing to deliver the activity? Question before you can commence this question:

Amount Amount Amount Total funding Aprox.% of

($ exc GST) ($ exc GST) ($ exc GST) Total

Financial year 2021-2022 2022-2023 2023-2024 $0.00 100

Location

Total funding $0.00 $0.00 $0.00 $0.00

**Provide bank account details for receipt of the grant payments should the Application be successful.**

You must respond to this question.

Bank account details for the receipt of payments:

* BSB Number: Enter the BSB number for the Applicant’s nominated bank account. Must be 6 digits only. Do not enter spaces or other characters.
* Account Number: Enter the account number for the Applicant’s nominated bank account. Must be 2 to9 digits only. Do not enter spaces or other characters.
* Account Name. Enter the account name for the Applicant’s nominated bank account. The account name should be as it appears on the bank statement. 60 character limited. The character count includes letters, spaces, paragraph marks, bullet points etc. Note: In this field accepts the characters of A toZ,0 to9, (),.’&-/\@. All other characters including carriage returns are not accepted.

BSB number Account number

Account name

**Assessment Criteria**

**Criterion 1: Contribution to the Funding Objectives, Investment Priorities and Public Good**

Describe how your proposal will:

* align with the stated Funding Objectives and the Investment Priorities in section 6, Table 1
* deliver public good benefits to famers and/or agricultural-dependent communities and businesses.

Proposals must explain the nature of the proposed project activity and expected benefits.

When addressing the criterion, strong applicants will outline:

* what new outputs (information, services, processes and/or products) will result from the project or idea and how they build on existing knowledge to create innovation
* the likely costs associated with using the new outputs and how will their utilisation create benefits
* the extent to which the project will contribute to an important gap in knowledge or innovation, or significant problem in Australia, to support improved drought resilience by farmers and agricultural-dependent communities and businesses
* the public benefits the proposal will deliver; what private benefits will be created from the project, and why it is appropriate for public funds to support that outcome; whether private benefits will be wholly or partially offset by co-funding for the project from non-government sources
* the total level of investment the proposal will leverage and the nature of any expected co-investment
* [for commercialisation activities] why you are unable to access sufficient funding for the entire project, including from your directors and shareholders, loans or equity investment.

You must respond to this question.

Note: In this field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

**Limit: approx. 525 words, 3500 characters**

**Criterion 2: Likelihood of success, capacity to deliver and commitment to the project**

Describe how you will deliver the project activities against your proposed project objectives.

You must also describe the activity you have undertaken to date to develop your project as well as the project co-contribution (cash and in-kind) that you may obtain, and the sources and nature of that co-contribution.

If you need help to develop your idea, describe what sort of assistance you require. You must describe your project risks, and your capacity to manage those risks.

When addressing the criterion, strong applicants will outline:

* the likelihood of success for the project and the risks to be managed
* your execution plan, including outlining your next steps if your project is successful
* skills, qualifications and experience of the identified lead applicants and partners to manage and complete projects of comparable outcomes, scope and budget. This should include information about the management team’s skills and capability
* access to facilities, equipment, technology and other resources
* [for commercialisation projects and developing products and services to meet unmet social and environmental needs] information about the target market, the value proposition, your competitors and market research.

You must respond to this question.

Note: In this field accepts the characters of A toZ,0 to9, (),.’&-/\@. Other characters and formatting are not accepted.

**Limit: approx. 525 words, 3500 characters**

**Additional Information**

**Consortium Arrangements**

**Does the Application plan to deliver the Project/Activity as part of the lead Agency of a consortium?**

You must respond to this question.

Please select the most appropriate option.

Yes No

If the Application is successful, the Applicant will be offered a Grant Agreement as the lead agency and held liable for all obligations contained in the Grant Agreement’s Terms and Conditions. This includes monitoring, management, financial performance, service outcomes and insurance coverage.

The panel of consortium members does not enter into a Grant Agreement. The Applicant should obtain agreement prior to submitting this Application.

Further evidence of the consortium arrangements may be sought from successful Applicants prior to the signing of the Grant Agreement.

**Budget Table**

Complete the below table for budget information per Project/Activity. Please itemise the travel, accommodation and administration expenses.

You must respond to this question.

|  |  |
| --- | --- |
| Budget Item 1 | Amount |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

If you have more than ten budget items, please provide an attachment for any additional information.

File:

**Applicant Contacts**

**Who is the Applicant’s preferred authorised contact person for this Application?**

The person must have authority to act on behalf of the Applicant in relation to this Application.

Title

First name Last name

Position

Telephone Mobile

Email address

**Provide an alternate authorised contact for this Application.**

This person must also have authority to act on behalf of the Applicant in relation to this Application.

Title

First name Last name

Position

Telephone Mobile

Email address

**Declaration**

Do you have any conflicts of interest that may occur related to or from submitting this application?

Yes No

Describe any conflicts of interest that may occur from submitting this Application.

**Limit: approx. 300 words, 2000 characters**

**Please read and complete the following declaration.**

This Declaration must be signed by an authorised representative of the Applicant (or, if this Application is a joint consortium Application, an authorised representative of the lead organisation). The authorised representative should be a person who is legally empowered to enter into contracts and commitments on behalf of the Applicant.

I declare that:

* The information contained in this form is true and correct.
* I have read, understood and agree to abide by the Guidelines.
* I have read, understood and agree to the Grant Terms and Conditions, should this Application be successful.
* I agree to receiving a Recipient Created Tax Invoice (RCTI) for this funding, if applicable should this Application is successful.
* I have read, understood and agree to information provided in this Application as detailed in the Use of Information.
* If and where any personal details of a third party are include, the third party has been made aware of, and given their permission for those details to appear in this Application and for their personal information to be shared as detailed in the Use of Information.
* I give consent to the Community Grants Hub to make public the details of the Applicant and the funding received, should this Application be successful.

I understand and agree to the declaration above.

I acknowledge that giving false or misleading information to the Community Grants Hub is a serious offence under Section 137.1 of the Criminal Code Act 1995 (Cth).

Full name of Authorised Officer Position of Authorised Officer Date

Please provide an estimate of the time taken to complete this Application Form, including:

* Actual time spent reading the guidelines, instructions and questions;
* Time spent by all employees in collecting and providing the information and;
* Time spent completing all questions in the Application Form.

Hours Minutes