

**The purpose of this sample application form is to provide potential applicants the opportunity to preview the full contents. The PDF sample application form is for demonstration purposes only and cannot be used to apply for funding. Any completed PDF sample application form will not be accepted.**



**Australian Government**

**Department of Education and Training**

Submission Reference:

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## Application Information

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### Closing Date/Time

Applications must be submitted by **2:00pm** Canberra local time on **Thursday 2 November 2017**.

### Making Sure Your Application is Saved

The 'Continue' button will not save your Application. For your Application to be saved, 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.

### Application Pack

Read all information in the Application Pack before completing this Application Form. The Application Pack is available on the [Community Grants Hub website](#). Applications will be assessed using the process outlined in the Community Child Care Fund – open competitive process (for approved child care services) Grant Guidelines.

### Community Grants Hub

This round is being administered by the Community Grants Hub on behalf of the Department of Education and Training.

### Application Help

Information about the Application process is available on the [Community Grants Hub](#) and GrantConnect websites.

Applicants must submit any questions relating to the Program or this Application process in writing to [support@communitygrants.gov.au](mailto: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 direct any general enquiries, requests for technical help or support in using and/or submitting the Application Form by:

- Phone **1800020283**
- Email to [support@communitygrants.gov.au](mailto:support@communitygrants.gov.au)

## Attachment Limits

This Application Form has been set up to allow users to attach files within the form. The maximum size allowable for individual attachments is no larger than 2MB and the form will not accept individual attachments above this size.

Please read individual question instructions carefully to be informed of these limits. The total size of all of the attachments combined in the form will not be allowed to exceed 15MB. Please plan to modify your attachment files accordingly if necessary.

## Sharing this Form

Please note that more than one person should not be accessing this form at the same time.

If this is done then there is a risk that information may be lost in the form and all information will not be transferred in submission.

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 allocated 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 this form.

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

Following electronic submission, a message with your Submission Reference ID will appear on your screen. An email will be sent to the main email contact and the provider organisation (if applicable) provided in the Application Form. A function is also available on the submission page to allow you to send a receipt email to the address of your choosing. Please save this email receipt for future reference and use it in all correspondence about this Application.

**Note:** Applications will be assessed using the process outlined in the Application Pack and Grant Guidelines. The Department will notify all Applicants of the grant funding outcome on completion of the assessment process.

## National Relay Service (NRS)

Department of Education and Training 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.

## Privacy

# Community Child Care Fund (CCCF)

The information you provide on this application form will be collected and used by the Department of Social Services (who implemented the Community Grants Hub), and disclosed to and used by the Department of Education and Training, for the purpose of assessing your application and ongoing administration and evaluation of the program. Please refer to the [Privacy Policy](#) and [Web Accessibility Policy](#) of the Department of Social Services, and the [Privacy Policy](#) of the Department of Education and Training.

The Community Grants Hub uses an integrated Smartform service assisted by the Department of Industry, Innovation and Science on [www.business.gov.au](http://www.business.gov.au).

The information in your Application will not be accessed by Department of Industry, Innovation and Science employees. The only exception to this is where Senior Analysts within the Department of Industry, Innovation and Science require access to your information for the sole purpose of troubleshooting technical errors. Where this occurs Senior Analysts will only access the data with permission and at the request of Community Grants Hub.

For more information about how the Department of Industry, Innovation and Science protects your privacy and personal information, please see the [www.business.gov.au](http://www.business.gov.au) and [Department of Industry, Innovation and Science's Privacy Policy External Site](#).

## Use of Information

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Your Submission Reference is:

Please note that your saved form, if not updated or submitted within a set period of time, will be deleted.

**Please 'Send yourself a reminder email' below. This email details the date and time your form will be deleted, the Submission Reference number, a link to access your saved form and information on how to contact us for further assistance.**

Your email address \*

Pre-population

Your organisation name is collected and stored in the departmental system by the Department of Education and Training for the purpose of administering Child Care Benefit approval under the Family Assistance Law.

The Community Grants Hub and Department of Education and Training will use the Organisation ID number that you enter into the form to populate the corresponding organisation name details that have been recorded for your organisation in the departmental system.

The purpose of this is to:

- reduce the administrative burden on applicants and enable applicants to more quickly complete applications
- ensure applicants can be notified as soon as possible of assessment outcomes
- ensure consistency of information in the system.

The pre-populated information about applicants is held securely. Any information obtained under the Family Assistance Law as part of the pre-population will continue to be protected by law, including the Privacy Act 1988 and the Family Assistance Law.

If the pre-populated information is not correct or if you do not agree to your organisation name being pre-populated in the form please contact the Community Grants Hub by:

- Phone **1800020283**
- Email to [support@communitygrants.gov.au](mailto:support@communitygrants.gov.au)

Please note that even if you do not agree to your application form to be pre-populated, your organisation ID will still be linked to the corresponding organisation name, which is stored in the system. Only the organisation name may become available to applicants who choose to pre-populate by entering that specific organisation ID.

## Use of Information

The Community Grants Hub and Department of Education and Training may use the information, other than personal information, provided in this Application Form to assist the Community Grants Hub and the Department of Education and Training to:

1. comply with the Australian Government requirement to publish the details of all grant recipients on the Community Grants Hub and the Department of Education and Training website
2. inform staff negotiating and establishing Grant Agreements of risks and issues that need to be addressed in the Grant Agreement for that program
3. inform future assessments for Applications.

You can only apply if you agree to the Community Grants Hub and the Department of Education and Training using the information (not personal information) you provide in this form for the purposes listed at 1), 2) and 3) above.

In addition, the Community Grants Hub may use the applicant's personal information, or disclose it to another organisation or government agency, if:

- it is necessary to provide the applicant with a service requested (including enabling the Community Grants Hub and the Department of Education and Training to progress/assess your application, and notifying the applicant's updated details).
- the applicant consents to the particular use or disclosure;
- the use or disclosure is reasonably necessary to lessen or prevent a threat to the life, health or safety of an individual, or to public health or safety or where the use or disclosure is reasonably necessary in order for the department or another government agency to take appropriate action in relation to suspected unlawful activity or misconduct; or
- the use or disclosure is required or authorised by law.

Check the box below if you agree to the Department of Education and Training using the information (not personal information) you provide in this Application Form.

I agree \*

## Eligibility Requirements

For eligibility requirements, refer to the Community Child Care Fund – open competitive process (for approved child care services) Grant Guidelines.

Are you a not-for-profit organisation? \*

Please refer to the Grant Guidelines for more information on not-for-profit organisations.

Yes

No

Is the approved child care service where this proposed activity will be delivered currently in receipt of Community Support Program funding? \*

Yes

No

## Grant Recipient Details

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Are you applying on behalf of an approved provider of an approved child care service? \*

To be eligible to apply under the CCCF – open competitive process, you must be the **approved provider (the applicant)** of an approved child care service under the family assistance law. If approved, the CCCF grant agreement will be between the Commonwealth and the approved provider. Applications for funding will also be accepted from approved child care services where they have been authorised to submit on behalf of the approved provider.

I am the approved provider of an approved child care service

I have been given consent by the approved provider of an approved child care service to be a representative who is legally authorised to enter in to contracts and commitments on behalf of the approved provider

Neither of the above

This information must relate to the **approved provider** of an approved child care service. If you require assistance with locating your Organisation ID, please contact the Community Grants Hub hotline on 1800020283

Organisation Id \*

Applicant's Legal Name

Applicant's Trading Name

Please provide the details of the approved child care service where the proposed activity will be delivered.

Approved providers can apply for funding with respect to the approved child care service that they operate and where the proposed activity will be delivered

As above

What is the service type of the approved child care service where this proposed activity will be delivered? \*

Centre-based day care (currently referred to as long day care and occasional care)

Family day care (FDC)

Outside school hours care (OSHC)

Please provide the Child Care Benefit Approval (CCB) information that relates to the approved child care service where the proposed activity will be delivered. \*

CCB Approval ID \*

Child Care Service Name

Does the applicant plan to deliver the proposed activity as part of, or as the lead agency of a consortium? \*

Some organisations may apply together, as a consortium, to deliver grant activities. If you are submitting a joint grant application or submitting on behalf of a consortium, a member organisation or a newly created organisation must be appointed as the 'lead organisation'. The lead organisation must be an approved provider under the family assistance law.

**Only the lead organisation will enter into a grant agreement with the Commonwealth and will be responsible for the grant. The lead organisation must complete the application form and identify all other members of the proposed consortium in the application. The lead organisation will act on behalf of all members of the consortium, and enter into contracts which are binding to them.**

Yes

No

An Applicant may determine that service delivery is best achieved through the use of a consortium arrangement.

**If the Application is successful, the Applicant will be offered a Grant Agreement with Department of Education and Training 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 with Department of Education and Training. 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.

## Applicant Contacts

Who is the legally authorised contact person for this Application?

Who is the legally 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 legally authorised contact for this Application. \*

Provide an alternate legally authorised contact for this Application. Mandatory.

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 \*

## Applicant Referees

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Provide the name and contact details of two referees who can support the Applicant's claims made against the selection criteria as outlined in this Application.

### Referee One

Title \*

First name \*

Last name \*

Position \*

Organisation \*

Relationship \*

Telephone \*

Mobile

Email address \*

#### Referee Two

Title \*

First name \*

Last name \*

Position \*

Organisation \*

Relationship \*

Telephone \*

Mobile

Email address \*

## Financial Viability and Governance

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Has any Australian Government agency notified the applicant of any issues with compliance with child care laws and regulations? \*



You must respond to this question.

Select 'No' if the Applicant has not been notified of any issues with compliance with child care laws and regulations by any Australian Government agency

Select 'Yes' if the Applicant has been notified of any issues with compliance with child care laws and regulations by any Australian Government agency. If Yes, provide details and/or an explanation of why any issues with compliance with child care laws and regulations should not be considered relevant to the application. in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & -/ \ @, all other characters including carriage returns are not accepted.

Yes  No

Has any Australian Government agency notified the child care service related to this application of any issues with compliance with child care laws and regulations? \*

You must respond to this question.

Select 'No' if the Applicant has not been notified of any issues with compliance with child care laws and regulations by any Australian Government agency

Select 'Yes' if the Applicant has been notified of any issues with compliance with child care laws and regulations by any Australian Government agency. If Yes, provide details and/or an explanation of why any issues with compliance with child care laws and regulations should not be considered relevant to the application. in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & -/ \ @, all other characters including carriage returns are not accepted.

Yes  No

Has the Applicant been involved in any litigation or prosecution in the past three years? \*

You must respond to this question.

Select 'No' if the Applicant has not been involved in any litigation or prosecution in the past three years.

Select 'Yes' if the Applicant has been involved in any litigation or prosecution in the last three years. If 'Yes' is selected, you must then provide details and/or explanation of why the litigation or prosecution should not be considered relevant to the Application in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & -/ \ @, all other characters including carriage returns are not accepted.

Yes  No

Have any key personnel directly involved in delivering the proposed activity (should the Application be successful) been involved in any litigation or prosecution? \*

You must respond to this question.

Select 'No' if no senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application.

Select 'Yes' if any senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application. If 'Yes' is selected, you must then provide the details of any senior official or person directly involved in delivering the Activity and details of the litigation or prosecution in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @, all other characters including carriage returns are not accepted.

Yes  No

Has there been any significant financial matter which may impact on the applicant in the performance of the proposed activity? \*

You must respond to this question.

Select 'No' if no senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application.

Select 'Yes' if any senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application. If 'Yes' is selected, you must then provide the details of any senior official or person directly involved in delivering the Activity and details of the litigation or prosecution in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @, all other characters including carriage returns are not accepted.

Yes  No

Are there any future commitments or contingent liabilities that might materially affect the applicant in the performance of the proposed activity? \*

You must respond to this question.

Select 'No' if no senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application.

Select 'Yes' if any senior official or person directly involved in delivering the Activity (should the Application be successful) has been involved in any litigation or prosecution that may reasonably be considered to be relevant to the Application. If 'Yes' is selected, you must then provide the details of any senior official or person directly involved in delivering the Activity and details of the litigation or prosecution in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. If the Applicant has settled a claim on confidential terms, please indicate this in your response. Department of Education and Training may request further information as part of the assessment process. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @, all other characters including carriage returns are not accepted.

Yes  No

If requested, is the applicant able to provide the following financial information?

A 'Yes' or 'No' response to all sub questions on whether the Applicant is able to provide the following financial information is Mandatory.

- Two most recent sets of year-end audited financial statements.
- Current year-to-date management financial information, for example, income and expenditure statement and balance sheet.
- The Applicant's financial statements fully compliant with the Australian Accounting Standards.

If 'No' is selected for any of these sub questions, you must then provide a brief explanation for the 'No' response in the 2000 character limit (approximately 300 words) field provided. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) , ' & -/ \ @, all other characters including carriage returns are not accepted.

Note: you may be required to provide documentation upon request.

1. Two most recent sets of year-end financial statements. \*  Yes  No
2. Current year-to-date management financial information, for example, income and expenditure statement and balance sheet. \*  Yes  No
3. Are the Applicant's financial statements fully compliant with the Australian Accounting Standards? \*  Yes  No

If requested, is the applicant able to provide the following documents?

Note: you may be required to provide documentation upon request.

A 'Yes' or 'No' response to all sub questions on whether the Applicant is able to provide the following documents is Mandatory.

- Documented organisational and financial policies and procedures.
- Business plan and/or strategic plan.
- Risk management plan.

Note: You may be required to provide copies of the above documentation within 7 days upon request.

1. Documented organisational & financial policies & procedures. \*  Yes  No
2. Business plan and/or strategic plan. \*  Yes  No
3. Risk management plan. \*  Yes  No

## About the Proposal

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What element of the CCCF will you be applying for? \*

If you are applying for more than one element, the option of pre-filling your form with the information you have provided up to this point is available. Alternatively, you can choose to commence a new application form for each element. These options will be presented to you upon submission of this form.

What element of the CCCF will you be applying for?

- Community Support
- Sustainability Support

Capital Support

Are you operating in an area of high unmet demand? \*

Please refer to the Grant Guidelines for more information about operating in an area of high unmet demand.

Yes

No

## Activity Details

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Please provide a short title of your application for the proposed activity. \*

You must respond to this question. 250 character limit. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc.

NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @ , all other characters including carriage returns are not accepted.

Please provide a brief description of your application for the proposed activity. \*

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: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @ , all other characters including carriage returns are not accepted.

(Limit: approx 150 words, 1,000 characters)

Characters entered:

Please provide the actual physical address where the proposed activity will be delivered.

The physical address where the proposed activity will be delivered must be completed in full and must not be a PO Box. For example:  
Level 1 Main Building 220 Business Street Canberra City ACT 2601

**Note:** the address fields accept the characters of A to Z, 0 to 9, ( ) . , ' & - / \ @ , all other characters including carriage returns are not accepted.

Please note that if an Applicant selects 'Unable to validate' following an initial failed validation attempt, the Department will use this non-validated address for correspondence.

Floor / Building; Unit; Apartment

Street number, name and type \*

Suburb/Town \*

State \*

Postcode \*

**Address Validated**

How many additional child care places will the proposed activity create?

Proposed activities under the Capital Support element must result in more child care places. \*

Note: The number of child care places a service can provide is dependent upon approval by the relevant State/Territory Regulatory Authority.

Will the proposed activity target children living in rural and/or regional communities? \*

Yes

No

Which category best describes the target audience for the proposed activity? \*

Primarily Indigenous children

Primarily non-Indigenous children

Both Indigenous and non-Indigenous children

## Funding for the Proposal

Please provide a breakdown of the proposed funding for the proposed activity. \*

Provide a breakdown of the proposed Department of Education and Training funding by financial year

	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Total funding	Approx.% of Total
Financial year	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023		
Total funding							

	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Amount(\$ exc GST)	Total funding	Approx.% of Total
	\$	\$	\$	\$	\$	\$	
<b>Total funding</b>	\$	\$	\$	\$	\$	\$	

Does the proposed activity rely on any contributions other than those requested in this application (including commercial borrowings, donations and in-kind or other co-contributions). \*

If Yes, provide details of other grant applications or approvals that the applicant is responsible for. Please note that you may be requested to provide letters of support or other forms of evidence before your application is considered further in the assessment process.

If Yes, you will be required to provide the details of the other funding submissions. Up to 10 records can be included in the Application Form by clicking the add button at the end of this question.

Yes  No

**If Yes, provide details of other grant applications or approvals that the applicant is responsible for.**

Please note that you may be requested to provide letters of support or other forms of evidence before your Application is considered further in the assessment process.

Source/Type of co-contribution (list a maximum of 10)	Amount/Value of co-contribution(\$ excl GST)	Status of co-contribution	Percentage of co-contribution out of total funding requested
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	\$	Confirmed	
	\$	Confirmed	
	\$	Confirmed	

Is the applicant in the process of applying for, or has the applicant recently been approved for (in the last 12 months), other grant funding outside of the Department of Education and Training for the proposed activity? \*

If Yes, provide details of other grant applications or approvals that the applicant is responsible for. Please note that you may be requested to provide letters of support or other forms of evidence before your application is considered further in the assessment process.

If Yes, you will be required to provide the details of the other funding submissions. Up to 10 records can be included in the Application Form by clicking the add button at the end of this question.

Yes  No

Please provide the bank account details of the applicant for the receipt of Community Child Care Fund grant payments should this 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 to 9 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 limit. The character count includes letters, numbers, spaces, paragraph marks, bullet points etc. NOTE: This field accepts the characters of A to Z, 0 to 9, ( ) . , ' & -/ \ @, all other characters including carriage returns are not accepted.

BSB number \*

Account number \*

Account name \*

## Assessment Criteria

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### Criterion 1 - Capital Support

***SC1 - Describe the need for additional child care places in your community and how your proposal will contribute to meeting this need.***

Your response should include:

- any information that supports your application such as population data or evidence of need and support from families, schools or community groups
- how you selected or will select the construction professional, including their experience, reliability and previous performance
- how you estimated the cost of the project and will manage unexpected expenses, including how you will deliver value for money (see section 8.3 of the GOG)
- the result of your efforts in securing other financial contributions for your project (for example bank, local council, charity, community organisation).\*

(Limit: approx 525 words, 3500 characters)

Characters entered:

### Criterion 2 - Capital Support

## **SC2 - Demonstrate the capacity and capability of your staff and organisation to deliver the proposed activity.**

Your response should include:

- how the people in your organisation will be involved in the proposed activity, including their roles, and any relevant experience and qualifications they will bring to the activity.
- any similar or other relevant activities your organisation is currently delivering or has previously delivered and their outcomes.
- organisational processes, procedures and systems that are in place to monitor and manage the proposed activity, report on progress and support its evaluation.
- how your organisation will ensure that the capital construction will be completed as planned. \*

(Limit: approx 525 words, 3500 characters)

Characters entered:

## Attachments

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All attachments must be submitted with the Application Form as separate documents.

Upload your budget proposal \*

File: Test Attachment.docx

The mandatory budget proposal template to be used is available on the GrantConnect and Community Grants Hub websites.

Upload your evidence of land/building ownership or permission from the land/building owner to implement proposal \*

File: Test Attachment 2.docx

Upload your simple floor plan \*

File: Test Attachment 2 - Copy.docx

## Declaration

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Privacy consent



As the legally authorised representative of the applicant:

I give consent to the Department of Education and Training to disclose any information that it holds about the applicant:

- that has been obtained under the family assistance law, or
- obtained in the course of administering a Commonwealth grant

to the Department of Social Services (who operates the Community Grants Hub), and third parties contracted to the Department of Education and Training and/or the Community Grants Hub, for the purpose of assessing my application, administration or evaluation of the program, and for the purposes as outlined under 'privacy' and 'use of information' sections of this application form.

Where the Department of Education and Training discloses information about the applicant to the Department of Social Services, or to third parties contracted to the Department of Education and Training and/or the Community Grants Hub, for the purposes of assessing my application, administration or evaluation of the program, and for the purposes as outlined under 'privacy' and 'use of information' sections of this application form, I also give consent to the Department of Social Services or third party to collect and use such information for the same purpose.

I consent to the Department of Education and Training and the Community Grants Hub to disclose the applicant's organisation name to the corresponding organisation ID as part of this application form's pre-population function.

I give consent to the Department of Education and Training to make public the details of the applicant and the funding received, should this application be successful.

I understand and agree the privacy consent above. \*

Please read and complete the following declaration.

I declare that:

- The information contained in this form is true and correct
- I have read, understood and agree to abide by the Grant Guidelines
- I have the authority to submit this application on behalf of the applicant. The applicant is aware that they will enter into a funding agreement with the **Department of Education and Training**, should this application be successful
- I have read, understood and agree to the Grant Terms and Conditions, should this application be successful
- I will retain receipts/evidence which document the appropriate expenditure of funding, should this application be successful
- I agree not to misuse any information that is made available to me which was obtained for the purpose of completing this application
- If my application is successful, I will contact the relevant State/Territory Regulatory Authority to notify all changes that may impact my approval under national law and I will contact the Department of Education and Training to notify all changes that may impact my approval under the family assistance law.
- I understand that incomplete applications may not be considered
- I agree to receiving a Recipient Created Tax Invoice (RCTI) for this funding if this application is successful, and
- If and where any personal details of a third party are included, the third party has been made aware of, and given their permission for those details to appear in this application.

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

Yes

No

I understand and agree to the declaration above. \*

I acknowledge that giving false or misleading information to the Department of Education and Training is a serious offence under Section 137.1 of the Criminal Code Act 1995 (Cth). \*

I confirm the information I have provided in this application is true and correct. \*

Full name of the legally authorised representative of the applicant \*

Position of the legally authorised representative \*

Date

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

- actual time spent reading the Grant 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

Sample Application Form