Form Preview

PAGE 1: Instructions and Eligibility Check

* indicates a required field

Instructions

You will be issued with a unique reference number when you start your application. Please quote this reference number in any correspondence or queries regarding your application. Your application can be completed in more than one session. You can save your progress and return to complete your application later. **Remember to save your application form regularly to avoid losing data.**

Deadline for submitting your application is at 3:00 pm (AEDST), Thursday 19 December 2024. The closing date and time is a strict deadline. No extensions to the deadline will be permitted.

Once you have submitted your application, a confirmation email will be sent to your nominated email address (attached to your SmartyGrants account). If you have not received this email, it means that you have not officially submitted your application. This confirmation email will also include a copy of your application for reference. Please keep the confirmation email and the copy of your application in a safe place as part of your records as you may need to refer to it later.

Your application is not submitted until you have received an email confirmation of successful submission. Pressing the save button does not submit your application. If you 'review and submit' your application and there are unanswered questions that must be responded to (mandatory), they will be marked in red. Click 'Go to page' to complete the question, then click 'Review and Submit' again. By clicking 'Go to page', your application form will be in edit mode. Your application cannot be changed once submitted. If you realise that you have made an error once you have submitted your application, please contact Multicultural NSW for assistance before the closing deadline via email grantsinfo@multicultural.nsw.gov.au

For any technical difficulties or issues with SmartyGrants, please e-mail: service@smartygrants.com.au

This grant will be assessed on merit through a competitive process.

Thank you!

Multicultural NSW Grants Team

ELIGIBILITY CHECK

PLEASE REMEMBER TO SAVE YOUR APPLICATION EVERY 20 MINUTES TO AVOID LOSING YOUR APPLICATION PROGRESS

1.	ls	the	Ap	pli	cant	t
Or	ga	nisa	itic	n a	a	
no	n-	prof	it s	sha	ring	ı

\circ	Yes	0	No

organisation or registered charity? *			
2. Applicant Organisation Authority *	 The Applying Organisation confirms they manage and have the legal and institutional authority to implement funded security measures at the place of worship or eligible place for the applied grant funding Activity 		
3. Is the Applicant Organisation and applied Activity located in NSW? *	○ Yes	○ No	
4. Confirm that the applied Activity will be delivered and funds expended by 30 June 2026 *	○ Yes	○ No	
5. Has the Applicant Organisation acquitted all MNSW grants that are due for acquittal? *	○ Yes	○ No	
6. Confirm you understand if successful in receiving grant funding you will be required to provide all appropriate insurances and licenses *	○ Yes, I understand	No, I will not be able to provide this	
7. Confirm that your organisation: *	 □ has NO Redress sanctions □ has NO winding up order or appointed administrator □ has NO pending or ongoing legal case(s) that would impact the organisation ability to deliver the propose project □ is NOT bankrupt □ has NO financial and organisational mismanagement If applicable, all 5 must be selected. Please see https://www.nationalredress.gov.au/ for more information about Redress sanctions. Refer to the Grant Guidelines for Excluded		
	Activities, Activity not elic consideration and organis requirements.	gible for funding	
8. Is the Activity an excluded activity? *	 No, the Activity is NOT an excluded activity 	O Yes, the Activity is an excluded Activity that is not eligible to apply for this grant funding	

Organisation Name

Form Preview

If any of the eligibility criteria are not met you will not be able to proceed with the application.

PAGE 2: Applicant Organisation

* indicates a required field

Organisation Details

Name of Applying

Organisation *

Name of Partner Organisation	Only detai	l where thi	s is applic	able		
Street Address *	Address Suburb	State	Postcode			
Postal Address *	Address					
	Suburb	State	Postcode	2		
Contact Person for this Application						
Name *	Title	First Nar	ne	Last N	ame	
Position Title *						
Telephone *	Must be a	n Australia	n phone ni	umber		
Mobile	Must be a	n Australia	n phone ni	umber		

Form Preview

			•	
_	m	_		
_	Ш	a		

Must be a valid email address

Organisation Details

The following organisations are NOT eligible to apply for funding:

- Individuals and sole traders
- Local Councils
- An Unincorporated Association
- State and Federal Government Departments and associated entities
- For profit organisations and commercial enterprises

9. Type of Organisation *

- Incorporated under the Associations Incorporations Act
- O Company limited by guarantee under the Corporations Act 2001
- Cooperative registered under Cooperatives Act 1992
- Incorporated by an Act of Parliament
- O Corporate trustee of a trust that has deductible gift recipient status under the Commonwealth Taxation laws
- An Aboriginal and/or Torres Strait Islander Corporation registered under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (Cth) or a Local Aboriginal Land Council under the Aboriginal Land Rights Act 1983 (NSW)
- Registered Charity with the Australian Charities and Not-for-profits Commission (only eligible if meets the Authority declaration in Question 2)

Select most relevant option. If you select 'other' please specify in the box which other equivalent regulatory body your not for profit organisation is registered or established under.

10. ABN Number

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

ABN

Entity name

ABN status

Entity type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

More information

ACNC Registration

Tax Concessions

Main business location

Form Preview

11. How many full-time equivalent employees (FTE) does your organisation have? *	 0 - 19 FTE employees 20 - 199 FTE employees 200 and more FTE employees
PAGE 3: Activity Overvi	ew
* indicates a required field	
Activity Details	
12. Select the Pathway you are applying for: *	 Pathway A - For grant funding requests of up to \$50,000 ('Pathway A') where an evidence-based security risk assessment is NOT required Pathway B - For grant funding requests of \$50,000 or more ('Pathway B'), an evidence-based security risk assessment IS required as supporting documentation to the grant application
13. Name of the applied Activity *	
14. Brief description of the Activity *	
	Word count: Must be no more than 500 words. Provide a short description of what you want to do.
15. Community Group *	Must be no more than 500 words.
15. Community Group * Religious Group Affiliation	Must be no more than 500 words. Provide a short description of what you want to do.
	Must be no more than 500 words. Provide a short description of what you want to do.
Religious Group Affiliation 16. What is your religious gro	Must be no more than 500 words. Provide a short description of what you want to do.

Delivery Details

18. Start Date of the Activity *

17. Religious Group - Christianity *

Form Preview

Must be a date and between 1/4/	2025 and 30/6/2026.					
19. End Date of the Activit	y *					
Must be a date and between 1/4/	2025 and 30/6/2026.					
 Place of worship 	tion type where you will de	-				
institution	-	r specialist religious educational				
Religious community centReligious retreat, sanctualPlace of religious significal		ed cemetery or memorial				
21. Where will the Activity	be delivered? *					
Please provide the primary locati	on of the project.					
Greater Sydney - All Regions	o Greater Sydney - West (including South West)	 Illawarra Shoalhaven 				
Greater Sydney - Central	O Central Coast	New England and North West				
Greater Sydney - NorthGreater Sydney - SouthGreater Sydney - East	Central West & OranaFar WestHunter	Riverina MurrayNorth CoastSouth East and Tablelands				
PAGE 4: Pathway A D	etails					
* indicates a required field						
Pathway A						
For grant funding requests of up to \$50,000 Exclusive of GST ('Pathway A') where an evidence-based security risk assessment is ${\bf NOT}$ required						
23. Are you applying for RePreparedness (Planning arYesNo		Prevention (Protection) and				
 24. Are you applying for Resilience measures 3 and 4: Response (Incident Management) and Recovery (Wellbeing and Resilience) * Yes No 						
Resilience measures 1	and 2: Prevention (Prote	ection) and				

Preparedness (Planning and Capability)

25. Select at least one of the below * □ All-hazards capital safety and security infrastructure □ Maintenance costs for one year from the installation date for new security equipment purchased with the grant □ Minor construction related to the project and minor renovation related to the project □ Training in the proper use of new security equipment by staff and volunteers □ Expert security risk assessments □ Development of risk mitigation plans, processes, protocols and guidelines
At least 1 choice must be selected.
All-hazards capital safety and security infrastructure details
26. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
27. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Maintenance costs for one year from the installation date for new security equipment purchased with the grant
28. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
29. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\bf *}$
Word count: Must be no more than 750 words.
Minor construction related to the project and minor renovation related to the project
30. Funding Amount Requested *
\$ Must be a whole dollar amount (no cents) and no more than 50000.

31. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Training in the proper use of new security equipment by staff and volunteers
32. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
33. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\color{blue}\star}$
Word count: Must be no more than 750 words.
Expert security risk assessments
34. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
35. Provide details on what you would deliver for this funding category if successful in receiving grant funding $\boldsymbol{*}$
Word count: Must be no more than 750 words.
Development of risk mitigation plans, processes, protocols and guidelines
\$ Must be a whole dollar amount (no cents) and no more than 50000.

Form Preview

37. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\bf *}$
Word count: Must be no more than 750 words.
Resilience measures 3 and 4: Response (Incident Management) and Recovery (Wellbeing and Resilience)
38. Select at least one of the below * □ 24/7 safety and wellbeing support services for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places. □ Incident management training and emergency drills or planning for religious leaders, staff, volunteers, chaplains, and community members who attend eligible places. □ Cyber-safety measures and training addressing the risk of online hate and threats for managers of digital and social media channels and religious service livestreams. □ Training in first aid, psychological first aid and trauma-informed pastoral care for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places. At least 1 choice must be selected.
24/7 safety and wellbeing support services for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places.
39. Funding Amount Requested * \$ Must be a whole dollar amount (no cents) and no more than 50000.
40. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\color{gray}\star}$
Word count: Must be no more than 750 words.
Incident management training and emergency drills or planning for religious leaders, staff, volunteers, chaplains, and community members who attend eligible places.
41. Funding Amount Requested *

Must be a whole dollar amount (no cents) and no more than 50000.

Form Preview

42. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Cyber-safety measures and training addressing the risk of online hate and threats for managers of digital and social media channels and religious service livestreams.
43. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
44. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\color{blue} *}$
Word count: Must be no more than 750 words.
Training in first aid, psychological first aid and trauma-informed pastoral care for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places.
45. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 50000.
46. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.

PAGE 5: Pathway B Details

* indicates a required field

Pathway	В
---------	---

For grant funding requests of \$50,000 or more Exclusive of GST ('Pathway B'), an
evidence-based security risk assessment IS required as supporting documentation to the
grant application

grant application
47. Are you applying for Resilience measures 1 and 2: Prevention (Protection) and Preparedness (Planning and Capability) * ○ Yes ○ No
 48. Are you applying for Resilience measures 3 and 4: Response (Incident Management) and Recovery (Wellbeing and Resilience) * Yes No
Resilience measures 1 and 2: Prevention (Protection) and Preparedness (Planning and Capability)
 49. Select at least one of the below * □ All-hazards capital safety and security infrastructure □ Maintenance costs for one year from the installation date for new security equipment purchased with the grant □ Minor construction related to the project and minor renovation related to the project □ Training in the proper use of new security equipment by staff and volunteers □ Expert security risk assessments □ Development of risk mitigation plans, processes, protocols and guidelines At least 1 choice must be selected.
All-hazards capital safety and security infrastructure
50. Funding Amount Requested * \$ Must be a whole dollar amount (no cents) and no more than 250000.
51. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Maintenance costs for one year from the installation date for new security equipment purchased with the grant
52. Funding Amount Requested *

Form Preview

Must be a whole dollar amount (no cents) and no more than 250000.

53. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count
Word count: Must be no more than 750 words.
Minor construction related to the project and minor renovation related to the project
54. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 250000.
55. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Training in the proper use of new security equipment by staff and volunteers
56. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 250000.
57. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Expert security risk assessments
58. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 250000.

59. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\bf *}$
Word count: Must be no more than 750 words.
Development of risk mitigation plans, processes, protocols and guidelines
60. Funding Amount Requested *
\$ Must be a whole dollar amount (no cents) and no more than 250000.
61. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\bf *}$
Word count: Must be no more than 750 words.
Resilience measures 3 and 4: Response (Incident Management) and Recovery (Wellbeing and Resilience)
62. Select at least one of the below * □ 24/7 safety and wellbeing support services for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places. □ Incident management training and emergency drills or planning for religious leaders, staff, volunteers, chaplains, and community members who attend eligible places. □ Cyber-safety measures and training addressing the risk of online hate and threats for managers of digital and social media channels and religious service livestreams. □ Training in first aid, psychological first aid and trauma-informed pastoral care for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places. At least 1 choice must be selected.
24/7 safety and wellbeing support services for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places.
63. Funding Amount Requested * \$ Must be a whole dollar amount (no cents) and no more than 250000.

Form Preview

64. Provide details on what you would deliver for this funding category if successful in receiving grant funding ${\bf *}$
Word count: Must be no more than 750 words.
Incident management training and emergency drills or planning for religious leaders, staff, volunteers, chaplains, and community members who attend eligible places.
65. Funding Amount Requested *
\$ Must be a whole dollar amount (no cents) and no more than 250000.
66. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Cyber-safety measures and training addressing the risk of online hate and threats for managers of digital and social media channels and religious service livestreams.
67. Funding Amount Requested *
Must be a whole dollar amount (no cents) and no more than 250000.
68. Provide details on what you would deliver for this funding category if successful in receiving grant funding *
Word count: Must be no more than 750 words.
Training in first aid, psychological first aid and trauma-informed

Training in first aid, psychological first aid and trauma-informed pastoral care for religious leaders, chaplains, staff and volunteers who support places of worship and other eligible places.

69. Funding Amount Requested *

\$ Must be a whole dollar an	nount (no cents) and no	more than 250000	
		deliver for this fundir	ng category if
successful in receiving		deliver for this failur	lg category ii
Word count: Must be no more than 750) words.		
Evidenced-Based	Security Risk As	sessment	
		grant funding requests ovidence-based risk asse	
		ependent assessment or ment or the proposed so	
71. Upload your Evid Attach a file:	ence-Based Secur	ty Risk Assessment *	
72. Summarise the d the grant *	ocument and how	the information demo	onstrates a need fo
J			
Word count: Must be no more than 200) words		
Supporting Evider	ice		
		ore only (Pathway B), su ety measures based on:	bmit evidence showir
• Current risks asse	ssments		
Health and safetySecurity capability			
 Incident reports 	assessificites		
Community sentimAnd/or other evide		he need for the grant	
73. Select your supp	orting documentat	ion categories *	
☐ Current risks assess☐ Health and safety a	sments	_	

 □ Security capability assessments □ Incident reports □ Community sentiment or demand □ And/or other evidence demonstrating the nat least 1 choice must be selected. 	eed for the grant
Current Risk Assessments Upload	
74. Current risk assessments * Attach a file:	
75. Summarise the document and how the the grant *	e information demonstrates a need for
Word count: Must be no more than 200 words.	
Health and Safety Audits upload sec	tion
76. Health and Safety Audits * Attach a file:	
77. Summarise the document and how the the grant *	e information demonstrates a need for
Word count: Must be no more than 200 words.	
Security capability assessments	
78. Security capability assessments * Attach a file:	
79. Summarise the document and how the the grant *	e information demonstrates a need for

Word count: Must be no more than 200 words.
Incident reports
80. Incident reports * Attach a file:
81. Summarise the document and how the information demonstrates a need for the grant *
Word count: Must be no more than 200 words.
Community sentiment or demand
82. Community sentiment or demand * Attach a file:
83. Summarise the document and how the information demonstrates a need for the grant *
Word count: Must be no more than 200 words.
Must be no more than 200 words.
Must be no more than 200 words. And/or other evidence demonstrating the need for the grant 84. And/or other evidence demonstrating the need for the grant *
Must be no more than 200 words. And/or other evidence demonstrating the need for the grant 84. And/or other evidence demonstrating the need for the grant * Attach a file: 85. Summarise the document and how the information demonstrates a need for

Form Preview

PAGE 6: Work Plan and Risk Mitigation Strategy

* indicates a required field
Workplan
86. Upload your workplan * Attach a file:
87. Summarise the document and how the information demonstrates a need for the grant *
Word count: Must be no more than 250 words.
Risk Mitigation Strategy
The risk mitigation strategy should show your organisation's capacity to implement the project through appropriate project risk management.
88. Upload your risk mitigation strategy * Attach a file:
89. Summarise the document and how the information demonstrates a need for the grant *
grama
Word count: Must be no more than 250 words.
Capital Works, Infrastructure or Equipment
90. Capital Infrastructure or Equipment * ○ We, the organisation, understand if the application is successful, we must comply with industry and ISO standards for any capital infrastructure Activity or equipment purchased

- 91. Capital Infrastructure Projects that have already commenced *
- O We, the organisation, understand if the application is successful, capital infrastructure projects that commence prior to grant agreement execution are not eligible for use of this grant program funds

Form Preview

PAGE 7: Demonstrating the Need, Delivering Outcomes and Measuring Success

* indicates a required field

Demonstrating the Need

92. Provide details of why there is a need for the resilience measure or measures that you are seeking funding support for: *
Ward accept
Word count: Must be no more than 750 words.
93. Detail how the proposed grant funded safety measures meet a need that is not met through existing measures or through other available funding sources. *
Word count: Must be no more than 750 words.
Delivering Outcomes
The intended outcomes of the Grant Program are to enable communities to come together safely to profess, practice and maintain their faith and religious heritage by:
 Protecting faith communities and the places where they gather from harm or damage through enhanced safety and security measures Improving risk mitigation planning, preparedness and incident management at places
 where faith communities gather Building community awareness, cohesion, resilience and wellbeing relating to the safety and security of places where faith communities gather
94. Which of the intended outcomes does your grant submission intend to deliver on if successful in receiving grant funding? *
☐ Protecting faith communities and the places where they gather from harm or damage through enhanced safety and security measures
☐ Improving risk mitigation planning, preparedness and incident management at places where faith communities gather
☐ Building community awareness, cohesion, resilience and wellbeing relating to the safety and security of places where faith communities gather At least 1 choice must be selected.
95. How will you track delivery progress for your resilience Activity or Activities? *
Word count:
Must be no more than 750 words.

Protectii	ng faith	communi	ties and	the place	es where	they g	ather f	rom
harm or	damag	e through	enhance	ed safety	and seco	urity m	easure	S

communities and the places where they gather from harm or damage through enhanced safety and security measures outcome *
Word count: Must be no more than 750 words.
Improving risk mitigation planning, preparedness and incident management at places where faith communities gather
97. Provide details on how your Activity will deliver on the Improving risk mitigation planning, preparedness and incident management at places where faith communities gather outcocme *
Word count: Must be no more than 750 words.
Building community awareness, cohesion, resilience and wellbeing relating to the safety and security of places where faith communities gather
98. Provide details on how your Activity will deliver on the building community awareness, cohesion, resilience and wellbeing relating to the safety and securit of places where faith communities gather outcome: *
Word count:
Must be no more than 750 words.
Measuring Success
99. How will you measure success and outcomes for your resilience Activity or Activities? *
Word count: Must be no more than 750 words.

Form Preview

PAGE 8: Financials

100. Previous and Current Funding Sources for the past three years

Name of the Funding Source	Amount
	Must be a dollar amount.
	\$
	\$
	\$

Foreign Organisation or Foreign Government Funding

 101. Have you received or are you going to request funding from a foreign organisation/s and/or foreign government/s for this Activity? * Yes No For example, your consulate or a political party 	
102. Have you received funding from a foreign organisation/s and/or foreign government/s for your organisation? *○ Yes○ No	

103. Provide details on Foreign Organisation or Foreign Government Funding

Which Foreign Organisation/s or Foreign Amount Government/s have you received or will be requesting funding from?

Must be no more than 150 characters.	Must be a dollar amount.
	\$
	\$
	\$

104. ITEMISED BUDGET

Outline your Activity budget. Clear item descriptions must be given. MNSW have provided some prompts to assist you in outlining your budget.

Note, you can add more rows to the below budget if you need using the + button.

Refer to the **Grant Guidelines** for items not eligible for funding.

^{*} indicates a required field

Form Preview

Incomo

The budget **MUST** balance (**TOTAL INCOME = TOTAL EXPENDITURE**). Please include these areas in your budget INCOME and EXPENDITURE columns. All figures are GST exclusive.

Please don't add commas to figures, eg. write \$1000 not \$1,000

¢ Amount

Do not include In-Kind services in the Itemised Budget. The Itemised Budget should only outline Cash Income and Paid Services.

Expanditure Details & Amount

income		(eg venue hire, sound & equipment, activities, staff related costs etc)	э Amount
3	Must be a dollar amount		
	Must be a dollar amount.		
exceed \$250,000			
Multicultural NSW		Applicant to Add	
Grant (amount you are applying for)		Expenditure 1 Details	
Applicants Contribution		Applicant to Add Expenditure 2 Details	
Sponsor Income		Applicant to Add Expenditure 3 Details	
Other Grant Income		And so on	
Other Income			

Do you have Value-In-Kind

In-kind services and contributions are **valued at their fair market value or at their actual cost**. In other words, they are valued at what you would pay for them if they were not donated.

105. Do you have	Value-In-Kind se	rvices supporting	your Activit	y that you	would
like to outline? *					

_	` '
()	Yes

 \bigcirc No

106. List your Value-In-Kind

Value in Kind Item Value in Kind Amount Must be a dollar amount. Marketing Volunteers \$ Volunteers \$

Form Preview

Pathway A - Total funding amount requested

107. Total Grant Funding amount requested in this application ${\color{red}^{*}}$

\$	
This number/amount is calculated.	
The minimum grant amount you can request for amount is \$50,000. Amounts are Exclusive of GS	
This amount is calculated on responses from Pag	e 4.
Pathway B - Total funding amount rec	juested
108. Total Grant Funding amount requested	l in this application *
\$	
This number/amount is calculated.	
The minimum grant amount you can request for amount is \$250,000. Amounts are Exclusive of G	
This amount is calculated on responses on Page	5.
INCOME & EXPENDITURE	
109. Grant funding amount requested in th	s application *
\$	
Whole numbers only. Applicants are able to apply for o	grants ranging from \$5,000 and up to \$250,000.
The maximum amount you can apply for is depe	ndent on the Pathway you selected:
 For grant funding requests of up to \$50,000 	(Pathway A) where an evidence-based
security risk assessment is NOT requiredFor grant funding requests of \$50,000 or mo	are (Dathway B) an evidence based
security risk assessment IS required as supp application	
110. What is the total estimated income for	the Activity? *
\$	•
This number/amount is calculated.	
111. What is the total estimated expenditu	ro for the Activity? *
\$	e for the Activity:
This number/amount is calculated.	
What is the total budgeted cost (dollars) of your Activi	ty?
112. Budget Variance *	
\$	
This number/amount is calculated.	
113. Value-In-Kind Total	

Form Preview

\$

This number/amount is calculated.

PAGE 9: Declaration

* indicates a required field

Application Declaration

By clicking the submit button you are confirming to Multicultural NSW that the management committee has endorsed this application. The management committee declares that they:

- Are not aware of any circumstances which adversely affect or might adversely affect the organisation's ability to carry out the Activity.
- Have read and understood the Grants Program Terms and Conditions and if awarded a grant, acknowledge that an agreement based on those terms and conditions will apply to the grant.
- Agree to comply with those terms and conditions in acquitting the grant.
- The information contained in this application is true and correct in every detail and have ensured that all required information is enclosed.
- Understand that if successful in securing a grant, the funds must be spent by 30 June 2026.
- Understand that if successful in securing a grant, our organisation will be required to adhere to any NSW Government's Public Health Orders.
- Understand that if successful in securing a grant, our organisation will be required to complete a short survey that may be published on Multicultural NSW website and other communication channels.
- Understand that if successful in securing a grant, our organisation may be required to participate in meetings with Multicultural NSW as required to share updates, insights and learnings.
- Understand the information in this application may be disclosed to other government agencies, reviewers and staff assisting with the administration or promotion of NSW government funding programs administered by Multicultural NSW. Please refer to our Privacy Policy on our website.
- Understand that if successful in securing a grant, key funding information including, organisation name, brief description of the Activity, funding amount, delivery date/s & location may be published by Multicultural NSW or shared with third parties.

DISCLAIMER

Submission of an application does not guarantee funding. The costs of producing an application is borne by the Applicant. The grant giving agency reserves the right to withdraw funding. Applicants should ensure that they have read all relevant program materials in order to be fully informed about the program's requirements.

Use of Information Information received in applications for funding is treated as confidential. However, documents held by the grant giving agency are subject to the Government Information (Public Access) Act 2009. This means that the information contained in application forms and other relevant documents may be released in response to a request lodged under this Act.

In order to adequately assess applications for funding and implement the funding program, information contained in the application and its attachments may be shared with delegated officers of the grant giving agency or shared with other government agencies should it be deemed appropriate.

Form Preview

Signatory 1 Email *

Should your organisation be successful, the following information will be made public; organisation name, brief description of the Activity, funding amount, delivery date/s & location.

Conflict of Interest Declar	ration			
You must declare if you or ar organisation or foreign gover the applying organisation from independently * O Yes O No Personnel is staff and volunteers	rnment w	hich is likely to	interfere with or	restrict
Provide details of the Cor	nflict of	Interest		
Please provide details on the	conflict	of interest *		
*By signing below, you decla application is true and correc application on behalf of the o understood the above checkl and the Terms and Condition	ct, and th organisat list, the N	at you are auth ion. You also de	orised to submit eclare that you ha	this ave read and
Date *				
	Must be a	date and no earlie date	r than 7/11/2024.	
	Signato	ry 1 Information	n	
Signatory 1 *	Title	First Name	Last Name	
Signatory 1 Position *				
Signatory 1 Phone Number *	Must be a	ın Australian phone	number.	

Must be an email address.

	Signator	y 2 Information	
Signatory 2 *	Title	First Name	Last Name
Signatory 2 Position *			
Signatory 2 Phone Number *	Must be ar	n Australian phone n	umber.
Signatory 2 Email *	Must be ar	n email address.	
PAGE 10: Supporting Do	ocumen	ts	
* indicates a required field			
ATTACHMENTS			
PLEASE CHECK THAT THE FOL	LOWING	DOCUMENTS AR	E ATTACHED
The following attachments ar	e include	d:	
Maximum 25MB but suggest no r	more than	5MB	
A copy of the organisation's r directors of the organisation at the time of submitting this (in accordance with the requi Attach a file:	with stat applicat	ements being no ion, including co	ot more than two years old intact details for the auditor
If the organisation is less than 12 mc	onths old, pl	ease provide a lette	r
A copy of the organisation's of Attach a file:	ertificate	e of registration	*
A copy of the organisation's certifica the Australian Securities and Investn be accepted.			
A copy of the organisation's A Australian Taxation Office Attach a file:	ABN and (GST registration	confirmation from the

Form Preview

Not-for-profits Commission Attach a file:	ation from the Australian Charities and
Last annual report Attach a file:	
We, the organisation, understand if the a a copy of our Public Liability Insurance (owill be released to the nominated account Yes, I understand this requirement	
We, the organisation, understand if the abe required to provide a copy of our Wor Volunteers Insurance before any funds wof the organisation. * Yes, I understand this requirement	
Please note that if the above mandatory application will not be considered for fun	•
How did you find us?	
Where did you hear/ learn about this program? *	

YOUR APPLICATION WILL NOT REACH MULTICULTURAL NSW UNTIL YOU CLICK THE SUBMIT BUTTON.

PLEASE ENSURE YOU CLICK THE SUBMIT BUTTON WHEN YOUR APPLICATION IS COMPLETE.