

APPLICATION FORM – Round 2

Version 22 July 2024

Instructions for completing this form

Round 2 of this grant opportunity provides further funding to communities who have been impacted by the October 2022 Victorian Floods in recognition of the ongoing effects of these significant floods.

Applicants must have read the **Aboriginal Culture and Healing Flood Recovery Grant Program** - **Round 2 - for the October 2022 Victorian Floods, Funding Guidelines** to ensure they have reviewed the eligibility and selection criteria, eligible activities and application requirements.

Applicants are also advised to familiarise themselves with the template Grant Agreement before completing the application form.

Applicants must complete all sections of this form.

Applicants must read and agree to the declaration which advises you of your responsibilities.

All documents are available on the Federation of Victorian Traditional Owner Corporations' (Federation) website: https://fvtoc.com.au/sections/flood-recovery-grant-program/

For assistance with application enquiries, please contact the Federation at recovery@fvtoc.com.au or contact:

- Samitha Rao, Policy and Legal Officer, on 0411 128 028; or
- Jill Webb, Manager, Nation Building Program on 0408 586 297.

Submission

Please submit your application form and any supporting documentation by email to recovery@fvtoc.com.au

Completed Application Forms must be received by the Federation at the above email address by **5.00pm, Monday 19 August 2024**.

A. Applicant Details

A.1 Organisation Details

Provide details of the main applicant organisation.

Applicants must have a registered business address in Victoria.

If you will be auspiced for this grant, the relevant auspice contact details will be captured in section 2.5 below.

Organisation - Basic Details			
Registered organisation name	Click or tap here to enter text.		
Primary contact	Name	Click or tap here to enter text.	
	Position in organisation	Click or tap here to enter text.	
	Phone number	Click or tap here to enter text.	
	Email address	Click or tap here to enter text.	
Authorised representative	Name	Click or tap here to enter text.	
This is a person delegated with the authority to apply on the organisation's behalf, i.e., Chief Executive Officer, Director or Secretary.	Position in organisation	Click or tap here to enter text.	
Organisation address details Your registered business address must be in Victoria.	Registered street address Click or tap here to enter text.	Registered postal address Click or tap here to enter text.	
What does your organisation do?	Click or tap here to enter text.		

B. Eligibility

Applications are open to all organisations that meet the eligibility criteria as outlined on page 6 of the Aboriginal Culture and Healing Flood Recovery Grant Program - Round 2 - for the October 2022 Victorian floods, Funding Guidelines (Funding Guidelines).

B.1 Aboriginal organisation

Applicants must be an Aboriginal organisation.

Aboriginal Organisation			
Is your organisation Aboriginal-owned*? ☐ Yes ☐ No			
Is your organisation Aboriginal-controlled**?	□ Yes	□ No	

B.2 Legal entity status

Applicants must possess an Australian Business Number (ABN) and be a legal entity, which is incorporated.

Organisation - Australian Business Number (ABN)		
Do you have an ABN?	□ Yes	
	Provide ABN:	
	□ No	
	You must apply with an Auspice organisation and provide their details in section 2.5 below.	

Organisation – Legal Entity Status	
What is the legal status of your organisation?	☐ Incorporated under the <i>Corporations Act</i> 2001(Cth)
	☐ Incorporated under the Associations Incorporation Reform Act 2012 (Vic)
	☐ Incorporated under the <i>Corporation</i> (Aboriginal and Torres Strait Islander) Act 2006 (Cth)
	☐ Not an incorporated legal entity
	You must apply with an Auspice organisation and provide their details in section 2.5 below.
Incorporation number/Indigenous Corporation Number (ICN)	

^{*}An organisation is considered Aboriginal owned where 50% or more of the organisation's members or proprietors are Aboriginal.

**An organisation is considered Aboriginal controlled where 50% or more of the organisation's board or management committee is Aboriginal.

Are you a Social Enterprise?	☐ Yes	
	You must attach to this application the stated	
	purpose or mission statement of the enterprise which is related specifically to supporting	
	Aboriginal communities in disaster recovery.	
	□ No	
Are you registered to collect Goods and Services Tax (GST)?	□ Yes □ No	
If you do not have an ABN and/or are not incorpora and provide details for your Auspice in section B.5		
B.3 Location		
Is your organisation based in one or more of the el pages 7-8 the Funding Guidelines?	igible Local Government Areas (LGAs) listed on	
□ Yes □ No		
Will your project support the recovery needs of cor 2022 Victorian Floods?	nmunities in eligible LGAs affected by the October	
□ Yes □ No		
B.4 Other funding grants		
Do you have any outstanding acquittals for previou	is government grant programs?	
☐ Yes (complete details below) ☐	No (skip this section)	
Provide details of any outstanding acquittals for previous government grant programs.		
Click or tap here to enter text.		
B.5 Auspice details		
If your organisation does not have an ABN and/or supported by an eligible Auspice organisation that		
Are you being supported by an Auspice organisation	on?	
☐ Yes (complete details below)	No (skip this section)	
Do you have an Auspice agreement in place with the	he auspicing organisation?	
☐ Yes (please attach to this application)	l No	

Provide details for the Auspice organisation that has agreed to support your proposed grant activity.

Auspice - Basic Details				
Registered organisation name	Click or tap here to enter text.			
Primary contact	Name	Click or tap here to enter text.		
	Position in organisation	Click or tap here to enter text.		
	Phone number	Click or tap here to enter text.		
	Email address	Click or tap here to enter text.		
Authorised representative	Name	Click or tap here to enter text.		
This is a person delegated with the authority to apply on the organisation's behalf, i.e., Chief Executive Officer, Director or Secretary.	Position in organisation	Click or tap here to enter text.		
Organisation	Registered street address	Registered postal address		
address details	Click or tap here to enter text.	Click or tap here to enter text.		
What does your organisation do?	Click or tap here to enter text.			
	•			

Auspice - Australian Business Number (ABN)		
Provide ABN		

Auspice – Legal Entity Status	
What is the legal status of your organisation?	☐ Incorporated under the <i>Corporations Act</i> 2001(Cth)
	☐ Incorporated under the Associations Incorporation Reform Act 2012 (Vic)
	☐ Incorporated under the Corporation (Aboriginal and Torres Strait Islander) Act 2006 (Cth)
Incorporation number/Indigenous Corporation Number (ICN)	

B.6 Partnership arrangements

Applications will be considered from multiple eligible groups working together in partnership to develop and deliver a project.

Is this a partnership grant application?				
□ Yes (complete details below) □ No (ski	Yes (complete details below) □ No (skip this section)			
Provide details of all organisations and community groups partnering. All partnering applicants must meet the eligibility criteria.				
Partner 1 - Aboriginal Organisation				
Is your organisation Aboriginal owned? ☐ Yes ☐ No				
Is your organisation Aboriginal controlled?				

Partner 1 - Basic Details			
Registered organisation name	Click or tap here to enter text.		
Primary contact	Name Click or tap here to enter text.		
	Position in organisation	Click or tap here to enter text.	
	Phone number	Click or tap here to enter text.	
	Email address	Click or tap here to enter text.	
Authorised representative	Name	Click or tap here to enter text.	
This is a person delegated with the authority to apply on the organisation's behalf, i.e., Chief Executive Officer, Director or Secretary.	Position in organisation	Click or tap here to enter text.	
Organisation address details Your registered business address must be in Victoria.	Registered street address Click or tap here to enter text.	Registered postal address Click or tap here to enter text.	
What does your organisation do?	Click or tap here to enter text.		

Partner 1 – Legal Entity Status		
What is the legal status of your organisation?	☐ Incorporated under the <i>Corporations Act</i> 2001(Cth)	
	☐ Incorporated under the Associations Incorporation Reform Act 2012 (Vic)	
	☐ Incorporated under the <i>Corporation</i> (Aboriginal and Torres Strait Islander) Act 2006 (Cth)	
	☐ Not an incorporated legal entity	
	You must apply with an Auspice organisation and provide their details in section 2.5 above.	
Incorporation number/Indigenous Corporation Number (ICN)		
Are you a Social Enterprise?	□ Yes	
	You must attach to this application the stated purpose or mission statement of the enterprise which is related specifically to supporting Aboriginal communities in disaster recovery.	
	□ No	
Are you registered to collect Goods and Services Tax (GST)?	☐ Yes ☐ No	

Partner 2 - Aboriginal Organisation			
Is your organisation Aboriginal owned? ☐ Yes ☐ No			
Is your organisation Aboriginal controlled?	□ Yes	□ No	

Partner 2 - Basic Details				
Registered organisation name	Click or tap here to enter text.			
Primary contact	Name Click or tap here to enter text.			
	Position in organisation	Click or tap here to enter text.		
	Phone number	Click or tap here to enter text.		
	Email address	Click or tap here to enter text.		

Authorised representative	Name	Click or tap here to enter text.
This is a person delegated with the authority to apply on the organisation's behalf, i.e., Chief Executive Officer, Director or Secretary.	Position in organisation	Click or tap here to enter text.
Organisation address details	Registered street address	Registered postal address
Your registered business address must be in Victoria.	Click or tap here to enter text.	Click or tap here to enter text.
What does your organisation do?	Click or tap here to enter text.	

Partner 2 – Legal Entity Status		
What is the legal status of your organisation?	☐ Incorporated under the <i>Corporations Act</i> 2001(Cth)	
	☐ Incorporated under the Associations Incorporation Reform Act 2012 (Vic)	
	☐ Incorporated under the <i>Corporation</i> (Aboriginal and Torres Strait Islander) Act 2006 (Cth)	
	☐ Not an incorporated legal entity	
	You must apply with an Auspice organisation and provide their details in section 2.5 above.	
Incorporation number/Indigenous Corporation Number (ICN)		
Are you a Social Enterprise?	☐ Yes	
	You must attach to this application the stated purpose or mission statement of the enterprise which is related specifically to supporting Aboriginal communities in disaster recovery.	
	□ No	
Are you registered to collect Goods and Services Tax (GST)?	☐ Yes ☐ No	

You may wish to provide further information by way of separate attachment, if required.

Project Information

In this section you must provide the detailed information about your proposed project.

If your application is successful, the Federation will publish some grant details on its website. Published details include name of the grant recipient; a project title; a brief description and its intended outcome; and the amount of funding awarded.

C.1 Project title and description

Provide a project title.
Click or tap here to enter text.
Provide a brief project description.
Click or tap here to enter text.
C.2 Amount of grant funding
How much are you applying for? (amount \$, excluding GST)
A total grant pool of \$1,200,000 (excl. GST) has been allocated. Note that grants of up to a maximum of \$160,000 (excl. GST) will be made available.
Click or tap here to enter text.
C.3 Detailed project description and key activities
Provide a detailed description of your project including the project scope and key activities.
This information will be included in your grant agreement if your application is successful.
You must also provide a project plan including a risk assessment matrix which you should attach to your application.
Click or tap here to enter text.

C.4 Project purpose
Applicants must provide an explanation of how their project will deliver direct benefit to a flood affected community and support one or more of the objectives of the funding as outlined on page 4 of the Funding Guidelines.
Identify one or more program objectives and direct benefit (s) your project will deliver to a flood affected community:
\square Aboriginal people's unique experiences of trauma are addressed, and healing supported.
$\hfill\square$ Recovery and resilience are strengthened through Aboriginal culture, knowledge and connection between Country and healing.
☐ Aboriginal communities have increased capability to lead recovery and healing.
Describe how your project will support the program objectives and deliver direct benefit (s) to flood-affected community.
Click or tap here to enter text.
C.5 Aboriginal community participation, strengthening and preparedness for emergency
Describe how your project will be led by Aboriginal community or Traditional Owners and ensure Aboriginal community participation and engagement.
For example, identify how Aboriginal communities have been engaged in the development of your application, specifically Traditional Owner corporations and/or Aboriginal community-controlled organisations in the area, or collaborative efforts in delivering your project.
Click or tap here to enter text.

Identify one or more of the criteria below that best describes your eligible project activities.
□ Promote and support healing and cultural immersion for recovery.
☐ Improve Aboriginal community-led or Traditional Owner-led emergency recovery planning and coordination.
☐ Increase planning and capacity to implement culturally safe surge workplace practices.
Describe how your project will support the above criteria.
Click or tap here to enter text.
C.6 Project outcomes
This information will be included in your grant agreement if your application is successful.
Provide a summary of expected project outcomes.
Click or tap here to enter text.
Click of tap here to enter text.
C.7 Eligible Local Government Areas (LGAs)
Applicants must demonstrate that their project will occur in a flood-affected area and describe how the floods directly impacted on their community. Refer to pages 7-8 of the Funding Guidelines for more information on flood-affected areas in scope.
Describe how the October 2022 Victorian floods directly impacted your community.
Click or tap here to enter text.

What LGAs will your project activities take place in?
Click or tap here to enter text.
Where will the project be undertaken?
You must provide the street address where your project will be undertaken. If you have multiple sites, you must add the address of each site.
Click or tap here to enter text.

C.8 Planning and delivery

Project duration

Your project must be completed in line with the dates on page 10 of the Funding Guidelines. Your project can start upon execution of a grant agreement, estimated to be from September 2024. You must complete your project by 30 June 2025.

Estimated project start date	Click or tap to enter a date.	
Estimated project end date	Click or tap to enter a date.	

Project milestones

You must breakdown your project into milestones. You should include the key activities occurring at each milestone. The start date of milestone 1 is the expected project start date. The end date of your last milestone activity will be the project end date.

Milestone title	Key activities	Start date	End date
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.	Click or tap to enter a date.
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You may wish to	provide your responses by way of	separate attachment.	
Project governa	nce		
Describe how you	ur project will be managed.		
Compliance with	n state and federal legislation		
including under th	include information on how the prop he Aboriginal Heritage Act 2006 (Vi r Settlement Act 2010 (Vic) or Nativ	ic), any agreement or equiva	lent made under the
Describe how you legislation.	ur project will comply with the requi	rements under any relevant	state and federal
Click or tap here	e to enter text.		

The Federation may contact you to request additional information to support the assessment of your application.

C. Project budget

D.1 Project budget summary

Provide a summary of your eligible project income and expenditure over the life of the project, disclosing all sources of income and costs relating to the project, including in kind contributions. If you have obtained additional sources of funding including any in-kind contributions as part of the project, you will also need to provide details in the Additional Sources of Funding table at section D.2 below.

Summary of Income and Expenditure				
Type of income/expenditure	Financial year	Amount (\$) (excluding GST)		
Total project expenditure				

You may wish to provide your responses by way of separate attachment.

D.2 Additional sources of funding

Provide details of any additional sources of funding you have obtained to fund the project, other than the grant funding sought.

The total of all sources of funding plus your grant should be equal to your total project expenditure in the section above.

Your own contribution to the project is also considered a source of funding and must be provided.

Name of contributor	Click or tap here to enter text.
Type of contributor (your contribution, other government grants, other non-government contribution)	Click or tap here to enter text.
Value of contribution	Click or tap here to enter text.
Date due of contribution	Click or tap here to enter text.
Description	Click or tap here to enter text.

Name of contributor	Click or tap here to enter text.
Type of contributor (your contribution, other government grants, other non-government contribution)	Click or tap here to enter text.
Value of contribution	Click or tap here to enter text.
Date due of contribution	Click or tap here to enter text.
Description	Click or tap here to enter text.

D. Project finalisation

E.1 Additional information

You must attach any supporting documentation required.
☐ Project Plan including detailed Project Budget
A detailed project plan that includes: the objectives of the project, a project budget, project timeline, key project milestones and any identified project risks and how these will be managed.
☐ Evidence of land ownership (where applicable)
Where the proposed project site/s are not owned or managed by you, written consent is required from the property owner and/or property manager that allows for the implementation of the proposed project on each project site.
☐ Evidence of support from Auspice (where applicable)
Where you are being supported by an auspice organisation, written agreement of the auspice arrangement.
☐ Evidence of Social Enterprise mission (where applicable)
If your organisation is a social enterprise, a statement of your purpose or mission which is related specifically to supporting Aboriginal communities in disaster recovery.
☐ Evidence of community support (where applicable)
Letters of support for your project, which can include testimonials.

The Federation may contact you to request additional information to support the assessment of your application.

E.Application declaration

You are required to agree to the following declaration.

F.1 Applicant declaration

I declare and acknowledge the following to be true and correct.

- I have read and understood the Aboriginal Culture and Healing Flood Recovery Grant
 Program Round 2 for the October 2022 Victorian Floods, Funding Guidelines, including the privacy and confidentiality provisions.
- To the best of my knowledge the information in this application is correct and that I will contact the Federation if there are any inaccuracies or changes.
- The proposed project outlined in this application and any associated expenditure has been
 endorsed by the applicant's board/management committee or person with authority to commit the
 applicant to this project.
- I acknowledge that the Federation may seek additional information from the grant applicant organisation or other parties listed to clarify information provided, including any attached supporting documentation, as part of the assessment and review process.

Applicant Name	
Applicant Name	
Applicant Signature	
7 Applicant dignature	
Date	

F.2 Endorsement by authorised representative

If applicable, please confirm that this application is endorsed by an authorised representative of your organisation. This is a person delegated with the authority to apply on the organisation's behalf, i.e., Chief Executive Officer, Director or Secretary.

Name of authorised representative	
Signature of authorised representative	
Date	