



APPLICATION FORM: *Supporting Aboriginal Registration (SAR)*

This Application Form is to be completed by an authorised representative of your organisation and submitted to Aboriginal Housing Victoria via email to grantprograms@ahvic.org.au.

No.	Item	Details
1.	Organisation Name	
2.	Organisation CAN or ABN	
3.	Eligibility – mandatory requirements: Is your organisation: <ul style="list-style-type: none">• Located in Victoria,• A charity or not-for-profit,• An ACCO or TOC; and• Operating with an active Board of Directors. If You answer 'No' to any of the above questions, you are ineligible for this grant program. Please read the Guidelines for a definition of an ACCO and TOC.	
4.	Capacity to deliver outcomes (assessment criteria weighting =20%) What relevant skills and capabilities can your organisation demonstrate to successfully deliver your proposed outcomes? <i>(Dot point responses accepted)</i>	
5.	Purpose of applying for this grant (assessment criteria weighting =20%)	

	<p>What is the purpose of receiving this funding?</p> <p>This must be in alignment with the purpose of this grant program. Read the Guidelines for detail.</p> <p><i>(One to two sentences)</i></p>			
6.	<p>Outcomes of receiving funding</p> <p>(assessment criteria weighting = 20%)</p> <p>What is your organisation's expected result/s of participating in this funding program?</p> <p><i>(One to two sentences)</i></p>			
7.	<p>Activity Plan</p> <p>(assessment criteria weighting =40%)</p> <p>Please provide a breakdown for activities your organisation will undertake to achieve the Outcomes of receiving this funding, if funding is awarded.</p> <p><i>(Dot point responses accepted)</i></p>	<p>Key Activities (what)</p>	<p>Date (when)</p>	<p>Responsibility (who)</p>

9.	Amount of funding applied for	\$ (inc GST)		
10.	Breakdown of funding applied for Please provide an itemised breakdown of the costs associated with delivering on your organisation's identified funding outcomes. Note: Any preliminary details to support the cost amounts, including supplier quotes or invoices, provided will need to be inserted into this document or attached to the application. Your organisation has no obligation to formally engage suppliers contacted to gain initial costing information and will be used for assessment purposes only.	Name of cost	Description	Amount (\$)
		Total funding applied for	\$ (inc GST)	
11.	Applicant Contact Details (not assessment criteria) <i>Please insert the name and title of the person who will be Your contact officer for the purpose of this application.</i>	Full name: Title: Phone contact: Email address:		
12.	Organisation Signature			
13.	Date			