Aboriginal Languages Trust - 2022 Aboriginal Languages Revival Program

* indicates a required field

The Aboriginal Languages Revival Program provides one-off funding to Aboriginal community organisations and groups to support them to commence their Language revival projects. The program aims to promote and raise awareness of Aboriginal languages in communities across NSW, consistent with the objectives of the Aboriginal Languages Act 2017 (NSW).

Applicants can apply for grants from \$1,000 up to \$25,000.

The Aboriginal Languages Trust has allocated \$650,000 for the 2022-2023 Aboriginal Languages Revival Program.

Projects must be completed by 1 June 2024.

Applications close 5pm Tuesday 28 February 2023 (or before this date if the funds are expended).

An Applicant's Guide and Frequently Asked Questions (FAQs) to assist applicants are available from the Aboriginal Languages Trust website:

https://www.alt.nsw.gov.au/

Applicants should read the program documentation available on the websites before starting an application and contact the Aboriginal Languages Trust 1300 036 406 or email grants@alt.nsw.gov.au if you need more information.

Aboriginal Cultural and Intellectual Property (ACIP)

Aboriginal Affairs NSW has developed an Aboriginal Cultural and Intellectual Property (ACIP) Protocol that aims to build awareness and respect for Aboriginal Culture. The Protocol sets a standard for how the Aboriginal Languages Trust engages with Aboriginal People and Communities in regard to their cultural and intellectual property and what we expect from the organisations we fund.

Any Aboriginal Cultural or Intellectual Property submitted in a grant application to the Aboriginal Languages Trust remains the property of the relevant community organisation or Aboriginal person. The Aboriginal Languages Trust will not distribute or communicate any ACIP contained in SmartyGrants and agrees to respect the cultural protocols of Aboriginal People which it may apply to.

For more information on ACIP, including Protocols visit https://www.aboriginalaffairs.nsw.gov.au/our-agency/staying-accountable/aboriginal-cultural-and-intellectual-property-acip-protocol/

Completing this form:

Links to the Guidelines and FAQS are available throughout the application in SmartyGrants.

Form Preview

You can a download a copy of the ALT Grant Tool Kit from the home page of the Aboriginal Languages Trust Website.

https://www.alt.nsw.gov.au/

We want to work differently at the Trust, so you can complete part of this application by submitting audio or video recording in this application.

N.B. There are compulsory questions that must be completed online in this application.

Please download a copy of the application questions that you can respond to using audio or video recordings. https://www.alt.nsw.gov.au/

Each file uploaded has a size limit of 25mb. You can upload as many files as needed to complete your application.

How will you complete your organisations application? * □ Online application □ Audio and Online application □ Video and online application If you are submitting a video response, please ensure you have consent from everyone appearing in the video recording.
Aboriginal Languages Trust - 2022 Aboriginal Languages Revival Program
* indicates a required field
Applicant Details
The Aboriginal Languages Revival Program Grants, where possible, are distributed to small Community controlled Aboriginal organisations.
These are organisations that represent or service a specific Aboriginal community or language group, or a group of communities connected geographically and will be prioritised
Please refer to the Aboriginal Languages Revival Program Guidelines for more information.
 1. Are you eligible to apply for funding under this program? * □ Yes - refer to eligible applicants list below. □ No - please contact Aboriginal Languages Trust staff
2. Legal status of your organisation. * □ Aboriginal and/or Torres Strait Islander Corporation registered under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (Commonwealth) □ Company incorporated in Australia under the Corporations Act 2001 (Commonwealth) □ Local Aboriginal Land Council under the Aboriginal Land Rights Act 1983 (NSW) □ Incorporated Association (incorporated under state legislation, and commonly have 'Association' or 'Incorporated' or 'Inc' in their legal name □ Incorporated Cooperative (incorporated under state legislation, and commonly have 'Cooperative' in their legal name □ Incorporated trustee on behalf of a trust

	e of Applicant O	rganisation *		
Organisa	tion Name			
4. Tradi	ng Name of Org	anisation (if diffe	erent to Registered	Name of Organisation)
		, ((
5. Orga i Address	nisation Street	Address *		
Address				
Address I	ine 1 Suburb/Town	State/Province Pos	code, and Country are re	equired
7.001.000.1	1, 303013, 10111	,, 5.0.0, 1.0 1.1.00, 1.05	isoac, and country are re	
6. Orga i Address	nisation Postal	Address		
Address				
7. Orgai	nisation ABN *			
The ABN	provided will be	used to look up the	following information.	Click Lookup above to
check th	at you have enter	red the ABN correct	ly.	
Informati	on from the Austra	ian Business Registe	•	
ABN				
Entity na	me			
ABN stati	us			
Entity typ	pe			
Goods &	Services Tax (GST)			
DGR End	orsed			
ATO Chai	rity Type	More inform	ation at in the same	
ACNC Re	gistration			
Tax Conc				
Main bus	iness location			
Must be a	n ABN.			_
8. Prima	ary Contact Per	son *		
Title	First Name	Last Name		
9. Posit	ion *			

10. Contact Number *	
Must be an Australian phone number.	
11. Email Address *	
Must be an email address.	
12. Secondary Contact Person Title First Name Last Name	
13. Position	
14. Contact Number	
Must be an Australian phane number	
Must be an Australian phone number.	
15. Email Address	
Must be an email address.	
16. Do you need an Auspice organisation behalf? *	
 Yes - I have an auspice organisation for this grant application. 	 No - I will manage the funds myself.
Auspice Details	
17. Name of Auspice Organisation Organisation Name	
18. Trading Name of Organisation (if diff Organisation)	erent to Registered Name of Auspice
19. Auspice Organisation Street Address Address	

20. Auspice Organisation Postal Address

Address				
21. Aus	pice Organisatio	n ABN		
	I provided will be u at you have enter		e following information. ctly.	Click Lookup above to
Informat	ion from the Austral	ian Business Regist	er	
ABN				
Entity na	ame			
ABN stat	rus			
Entity ty	ре			
Goods &	Services Tax (GST)			
DGR End	lorsed			
ATO Cha	rity Type	More inform	<u>nation</u>	
ACNC Re	egistration			
Tax Concessions				
Main bus	siness location			
Must be a	an ABN.			
22. Aus Title	pice Primary Co First Name	ntact Person Last Name		
23. Pos	ition			
24. Aus	pice Contact Nu	mber		
Must be a	an Australian phone	number.		
25. Aus	pice Email Addr	ess		
Must be a	an email address.			

Aboriginal Language Project Details

* indicates a required field

26. Project Title *

Please note that the Project Title may be used for media and communication purposes.				
27. Project description - Tell us what your project is about? *				
Word count: Minimum 300 words recommended. Tell us what you are going to do and how you are going to do it?				
28. Which Aboriginal Country will your project be delivered on?				
29. Which NSW Aboriginal Language/s will benefit from your project?				
30. Project Start Date *				
Must be a date.				
31. Project End Date *				
Must be a date. The project must be completed by 1 June 2023.				
32. Total Amount Requested *				
Must be a dollar amount.				
What is the total financial support you are requesting in this application?				
Aboriginal Languages Revival Program Objectives				
* indicates a required field				
indicates a required held				
Audio Application upload Attach a file:				
Account a me.				
Maximum file size 25mb. Please download a copy of the application questions you can answer in your Audio recording.				
Video Recorded Application Attach a file:				
Maximum file size 25mb. Please download a copy of the application questions you can answer in your Video recording.				

33. Please select one or more of the programs objectives that aligns with your project. *		
Revive or reawaken Aboriginal Languages through effective languages activities		
 Develop resources to support Aboriginal Language activities Promote wider use and appreciation of Aboriginal Language activities 		
 Support Aboriginal Community Language custodianship by building community capacity 		
to direct Language revitalisation efforts.		
☐ Grow the Aboriginal Languages sector through workforce development		
At least 1 choice must be selected. How does your Language project meet the Trust's objectives.		
34. Describe how the project is Community-owned, driven and supported? *		
Word count:		
Maximum 300 words. Tell us how you project is owned, driven and support by your local Aboriginal Community?		
Community:		
35. Let us know about the Community support for your Language project.		
Please attach any letters of support from, or evidence of consultation with your		
Aboriginal Community representatives. * Attach a file:		
Actuent a file.		
36. What are the expected outcomes of this project and who in your Community will benefit? *		
will belieffe.		
Ward acust		
Word count: Maximum 300 words. For example: Youth, Elders or Community members?		
maximum 300 words. For example, rough, Elders of community members.		
37. How will the outcomes of this project benefit your Community? *		
Word count:		
Maximum 300 words.		
20 Have you received previous funding from the Aberiainal Languages Tweet or		
38. Have you received previous funding from the Aboriginal Languages Trust or Aboriginal Affairs NSW? *		
○ Yes ○ No		
Please let us know about any previously funded project.		
20. When did you receive provious funding?		
39. When did you receive previous funding?		
In what year?		

Form Preview

40. Previously funded project name?		
Budget		

41. Please provide detailed descriptions and costs for each item listed in your budget.

Income	\$ Expenditure	\$
ALT Grant	\$	\$
	\$	\$
	\$	\$
In Kind Contribution	\$	\$
	\$	\$
	\$	\$

Budget Totals

Total Income Amount *	Total Expenditure Amount *	Income - Expenditure *
\$	\$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.

Public Liability Insurance

* indicates a required field

You must have Public Liability Insurance for the duration of the project for a minimum \$10 million per claim. If your organisation is not covered, you will need to obtain cover by either:

- 1.a) purchasing cover for the duration of the project, or
- 2.b) approaching another organisation to apply for funding on your behalf, so that your project will be covered under their Public Liability insurance.

Public Liability Insurance is necessary to protect your organisation against claims of negligence made by third parties in relation to injury or property damage arising from your project.

	42. Does your organisation have adequate insurance cover for the proposed project? *				
	Yes - please upload your Certificate of Currency below.No - Pease contact the Aboriginal Languages Trust staff to discuss your options.				
43	. Policy Type *				
44	. Policy Expiry Date *				

Form Preview

45. Total Amount of Coverage? *	
46. Please upload your current Certifica Insurance covering this project. * Attach a file:	te of Currency for Public Liability

Bank Account Details

Should your application be successful, providing these details will allow for grant funds to be deposited directly into this bank account, helping us to get the funds to your organisation quicker.

If you have an auspice, enter their Bank Account Details here:

47. Bank Account * Account Name		
BSB Number	Account Number	
Must be a valid Aus	stralian bank account format.	

Declaration

Submission of application does not guarantee funding. Any costs associated with preparing this application are to be met by the applicant.

The Aboriginal Languages Trust reserves the right to withdraw funding at any time, particularly if any information provided in the application is found to be false or the project does not comply with public health orders under section 7 of the *Public Health Act 2010* (NSW). Applicants should read all relevant program information to be fully informed of requirements of the Aboriginal Languages Revival Program.

Privacy Notice

The Aboriginal Languages Trust and Aboriginal Affairs NSW is requesting this information from you so that we can assess your application for the Aboriginal Languages Revival Program 2022 as well as to generally administer the Program.

The person who makes an application that contains personal information is responsible for obtaining the consent of the person whom that information is about and making them aware of the content of this privacy notice.

Personal Information on this form is protected by the *Privacy and Personal Information*Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002 (NSW).

The information you provide in this form will be used for:

Form Preview

- processing the application;
- for reference during any acquittals;
- in any publicity relating to your project or this grant program;
- to meet legislative responsibilities and requirements such as those under the

Government Information (Public Access) Act 2009 (NSW);

- · NSW Government reporting requirements; and
- for monitoring, evaluation and improvement of the Aboriginal Languages Trust and Aboriginal Affairs NSW programs.

Any person may request access to their personal information that is held by The Aboriginal Languages Trust and Aboriginal Affairs NSW at any time. To access or update your personal information, or for more information on our privacy obligations, contact The Aboriginal Languages Trust or Aboriginal Affairs NSW.

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amount of funding will		tion name, details of your project and the
information about y ○ Yes	our language projec	tal Languages Trust to collect and share to activity?
relation to Aborigina O Yes		the Aboriginal Languages Trust in opportunities, events or initiatives? *
Applicant Declara	ation	
is true and correct, and	d that I am authorised	of this application including the attachments to submit this application to The Aboriginal making this application.
I understand that this a included in the applica		pject to the disclaimer and privacy notice
☐ I/we agree with the		
51. Name of person First Name	submitting applicati Last Name	on *
Thist ivallie	Last Name	
52. Name of Organis	sation *	
53. Auspice Organis First Name	ation Last Name	

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if applicable	
54. Name of Auspice	• Organisation
55. Position	

Your application will not be officially submitted until you 'review AND submit your application form, and completed all required questions.

Application Checklist

Before submitting your application, please check:

- Your organisation or Auspice is eligible to apply.
- An authorised or delegated person from the organisation has approved the application.
- All required questions are fully completed.
- The application has been reviewed and the budget checked for accuracy.
- All relevant documents have been uploaded.

*

□ I confirm this is correct