

Application - Disability Advocacy Futures Program 2023/24 Form Preview

Disability Advocacy Futures Program (DAFP) 2023/24 - Special Purposes and Projects; and Sector Development

* indicates a required field

Grant Program Overview

Please complete this form to submit an application for funding under the Disability Advocacy Futures Program (DAFP) 2023/24 Special Purposes and Projects; and Sector Development grant program.

Before you apply please read the [Disability Advocacy Futures Program \(DAFP\) 2023/24 Special Purposes and Projects; Sector Development Grant Guidelines](#) and [Frequently Asked Questions \("FAQs"\)](#) to make sure you understand all relevant requirements.

Please Note:

- Eligibility and submission of an application does not guarantee funding.
- This grant is one-off funding with up to a maximum fixed 12 month term ending 4 October 2024.
- Your application must be accurate and complete upon submission. If required information is not provided, your application will be deemed ineligible.
- Eligible organisations can only submit one project/activity proposal. The same project cannot be submitted twice by different applicants.
- Ensure your project/activity has not started or is about to be completed.
- The cost of preparing an application is the responsibility of the applicant.
- All activities and projects must be located within NSW and must be delivered in full by 4 October 2024.
- Your organisation must maintain current and adequate insurance, as per the [Disability Advocacy Futures Program \(DAFP\) 2023/24 Special Purposes and Projects; Sector Development Grant Guidelines](#). If your organisation is not covered, you can approach an eligible organisation to sponsor your application and submit the application on your behalf.
- If organisations are formally partnering with an incorporated not-for-profit, the sponsoring body must submit the application form – including their bank details and authorised signatories.
- Submissions close on **Monday 28 August 2023 at 5:00pm (AEST)**
- **Late applications will not be accepted.**

DAFP Grant Information session: Applicants are encouraged to register and attend an online briefing session scheduled on **Wednesday 26 July at 3.00 pm (AEDT)** via Ms Teams. If you wish to attend the online briefing session, please email DAFP@fac.s.nsw.gov.au

Support available:

For any questions about this grant program please email [DAFP grant program team](#) and quote your application reference number.

Please ensure to quote your Application ID (which appears at the top of your application form) **for all correspondence with DCJ.**

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Application Number

This field is read only.

The identification number or code for this submission. Please quote this number in all correspondence.

Eligibility Criteria

This section of the application form is designed to help you, and us, understand if the organisation meets the eligibility criteria for the Disability Advocacy Futures Program (DAFP) 2023/24 Special Purposes and Projects; and Sector Development grant program. It's important that all of the points listed below are confirmed before you complete your application to ensure that you do not spend time applying for an unsuitable grant.

I can confirm that:

- I have read and understand the [Disability Advocacy Futures Program \(DAFP\) 2023/24 Special Purposes and Projects; Sector Development Grant Guidelines](#) .
- I can demonstrate alignment between the project and the objectives of this grant program.
- The proposed project will be completed by **4 October 2024**.
- The proposed project is in an eligible location in NSW.
- Applicant Organisation can maintain adequate and current insurance cover including, but not limited to; Workers Compensation Insurance, Professional Indemnity Insurance, Personal Accident Insurance, and a minimum of \$10 million Public Liability Insurance.
- Applicant Organisation does not have a Redress Obligation under the [NSW National Redress Scheme](#).
- Applicant Organisation does not have any outstanding acquittals with DCJ.
- Applicant Organisation **must** adhere to NSW Government public health orders and advice in regard to COVID-19. Up-to-date information is available on the [NSW Government COVID-19 website](#)

Confirm Eligibility *

- I confirm that all the above statements are true and correct.

If you are eligible, you will be asked to demonstrate your eligibility in the next section

Eligibility and Organisation Details

* indicates a required field

Eligibility

Which of the following applies? *

- I am applying on behalf of my organisation
- I am applying on behalf of my organisation, which is subcontracting another organisation that will take a lead role in this project

Please note: the term "subcontracting" is used for the purposes of this grant program. If your organisation already has a formal subcontracting agreement in place, you will still be required to seek formal permission in writing from DCJ to enter into subcontracting arrangements using one of the available forms should your application be successful. <https://www.facs.nsw.gov.au/providers/working-with-us/fcm-resources/subcontracting/chapters/how-to-obtain-written-consent>

Application - Disability Advocacy Futures Program 2023/24

Form Preview

What is your organisation's legal structure? *

- an incorporated organisation registered and approved as not-for-profit body by NSW Fair Trading
- a not-for profit company limited by guarantee, registered in NSW (must have ACNC registration and/or DGR status)
- an association (registered under the Associations Incorporation Act 2009 with NSW Fair Trading)
- NSW Local Aboriginal Land Council
- a religious organisation operating in NSW
- NSW non-government organisations established under an Act of Parliament.

Hint: Please note that to be a "NSW non-government organisation established under an Act of Parliament" your organisation needs to have been established by name under an Act of Parliament (this is relatively rare, and applies only to NSW universities and a small number of large charities which have had Acts of Parliament enacted for this purpose - for example, the Macquarie University Act 1989). You can check your DGR status at <http://abr.business.gov.au/AdvancedSearch.aspx> . You can check your registration at the ACNC website at <http://www.acnc.gov.au/> .

Please attach evidence of the legal structure selected above: *

Attach a file:

Please note: Incorporated organisations and associations should upload a copy of their certificate of incorporation from NSW Fair Trading. Not-for-profit companies should upload a copy of their ACNC certificate or certification of DGR status. Indigenous Corporations should attached a copy of their registration certificate from the Office of the Registrar of Indigenous Corporations (ORIC)

What is the name of the Act of Parliament that established your organisation? *

HINT: Please note that to be a "NSW non-government organisation established under an Act of Parliament" your organisation needs to have been established by name under an Act of Parliament (this is relatively rare, and applies only to NSW universities and a small number of large charities which have had Acts of Parliament enacted for this purpose - for example, the Macquarie University Act 1989). A list of Acts can be found at <https://www.parliament.nsw.gov.au/lc/proceduralpublications/Pages/Alphabetical-List-of-Acts.aspx>

Insurance

Grant recipients must maintain current and adequate insurance appropriate to the activities/ services funded under this grant to cover any liability of the grant recipient that might arise in connection with the performance of its obligations under a Grant Funding Agreement. This must include but is not limited to a **minimum of \$10 million Public Liability Insurance.**

Please upload a Public Liability certificate of currency in the name of your organisation. *

Attach a file:

Please confirm that your organisation has not been publicly identified as declining to join the NSW National Redress Scheme OR failing to join the scheme at the expiry of six months after being notified to join the Scheme. *

- Yes, I confirm

Application - Disability Advocacy Futures Program 2023/24

Form Preview

No, I cannot confirm (You may be deemed ineligible for this grant)

PLEASE NOTE: For more information on the NSW Government Redress Scheme Sanctions Policy, visit <https://arp.nsw.gov.au/c2021-13-nsw-government-redress-scheme-sanctions-policy/>

Does your organisation have any outstanding acquittals due to the Department of Communities and Justice (formerly Family and Community Services)? *

Yes - you may be deemed ineligible for this grant program

No

PLEASE NOTE: If your organisation has any outstanding acquittals due to the Department of Communities and Justice you are not eligible to apply to this grant program. Please complete any outstanding acquittals prior to submitting your application.

Applicant Organisation Details

Grant recipient is responsible for project delivery.

Applicant Organisation Name (legal name): *

Organisation Name

Applicant Organisation ABN *

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	

Must be an ABN.

<https://abr.business.gov.au/>

Applicant Organisation primary address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant Organisation Website

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Must be a URL.

Authorised Organisation Project Contact

The Authorised Organisation Contact will receive formal correspondence from the Department of Communities and Justice and will be the **organisation's authorised delegated contact. The authorised signatory has delegated authority to sign on behalf of the organisation and should be the General Manager, CEO or Executive Officer, President, Organisation Board or Committee of Management Chair.**

It is your responsibility to update the Department of Communities and Justice of any contact details change during the delivery of the project.

Authorised Project Contact *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Position held in organisation *

Business Phone Number *

Must be an Australian phone number.

HINT: Please include the area code. Please provide a direct number, not a customer access line or hotline.

Email Address: *

Must be an email address.

HINT: This is the address we will use to correspond with you about this grant.

Applicant Organisation Bank Details

Bank Account *

Account Name

BSB Number Account Number

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Must be a valid Australian bank account format.

Details of organisation being subcontracted

Name of organisation being subcontracted *

Address of organisation being subcontracted *

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

Contact Person - Position: *

Contact Person - Phone Number: *

Must be an Australian phone number.

Contact Person - Email Address: *

Must be an email address.

Please attach a valid and current arrangement from the subcontracting organisation *

Attach a file:

Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date. <https://www.facs.nsw.gov.au/providers/working-with-us/fcm-resources/subcontracting/chapters/how-to-obtain-written-consent>

Project Details

* indicates a required field

Funding Allocation

Under the DAFP, the 2023/24 Special Purposes and Projects; and Sector Development grant programs aims to:

- support initiatives to assist people with disability in NSW to actively engage in their communities in a more informed and empowered way, for which alternative funding sources are not available; and
- drive quality improvement, collaboration and innovation among advocacy organisations, and to build stronger networks and learning opportunities.

Please select which funding stream you are applying for? *

- Special Purposes and Projects
 Sector Development

Project title

Project title *

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Project Timeline - Start Date *

Must be a date and no earlier than 9/10/2023.

Project Timeline - End Date *

Must be a date and no later than 4/10/2024.

Provide the physical address where the majority of project activities will take place *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

What Local Government Area (LGA) will your project or activity be held in? *

To find what Local government Area your project will be held in, please enter the venue address into the search box at: <https://www.olg.nsw.gov.au/public/find-my-council/>

Target Groups

Project Beneficiaries/Target group

DAFP 2023/24 Special Purposes and Projects; and Sector Development **focuses** on all people with disability in NSW who need support to access NSW Government funded or provided services, whether or not they are NDIS participants. Where relevant, it also targets specific communities and disability types.

Please advise your primary target group for your project/activity *

Please advise your secondary target group for your project/activity *

Audio Information

Audio Upload Information

For some of the next questions you can choose to either provide a written response **or** a recorded audio response. **You must not provide both a written and recorded response. Note: If you are attaching an audio file, please write "audio file attached" in the text box above the file upload option.** Audio recording software is freely available on most computers and phones. If you provide an audio response, the following information may be useful.

Application - Disability Advocacy Futures Program 2023/24

Form Preview

HOW TO CREATE AN AUDIO RECORDING ON YOUR PHONE/COMPUTER: Click on the links below for further instruction on how to make an audio recording for the following devices. **Computer:**

- [Mac](#)
- [Microsoft](#)

Phone:

- [iPhone](#)
- Android -[Google Pixel](#) -[Samsung](#)

SAVING YOUR AUDIO RECORDING: Your recordings will automatically be stored in the Sound Recorder/Voice Memos app. To upload your recording in SmartyGrants, you will first need to save your it locally as an audio file - that is outside of the Sound Recorder/Voice Memos App - in the device (phone or laptop) that you want to complete the application with.

There are a number of ways to do this. The following information provides guidance on only some of the ways that you can save a recording locally as an audio file. **a) You can save a recording as an audio file directly from the app by selecting the ellipses icon “...” and then selecting save.**

b) On a laptop, you can drag and drop the audio recording to your desktop

c) Share Recording to your email address and then save attachment to your device. *This option allows you to share recordings from your phone to your laptop.* Sharing a recording allows you to send the recording to your email, where you can then select the recording in the email attachment and select Save

- [Share a recording on Mac](#)
- [Sound Recorder app for Windows: FAQ](#)
- [Share a recording in Voice Memos on iPhone](#)
- [See your recordings on all your Apple devices](#)
- Share a recording on an Android Phone -[Share recording on Google Pixel](#) -[Share recording on Samsung](#)

AUDIO FILE TYPES ACCEPTED:

SmartyGrants supports the following audio file types for uploading:

File TypeFile Extension

Audio:

aac, adp, aif, aifc, aiff, au, dts, dtshd, ecelp4800, ecelp7470, ecelp9600, eol, flac, kar, lvp, m2a, m3a, m3u, m4a, mid, midi, mp2, mp2a, mp3, mp4a, mpga, oga, ogg, pya, ra, ram, rmi, rmp, snd, spx, wav, wax, wma

Please ensure that you save and upload one of the above types of audio files.

Grant Objectives and Outcomes

* indicates a required field

Program Objectives

Application - Disability Advocacy Futures Program 2023/24

Form Preview

The DAFP 2023/24 Special Purposes and Projects; and Sector Development grant programs has 3 key objectives:

1. Increase available supports to assist people with disability in NSW to actively engage in their communities in a more informed and empowered way.
2. Further develop the NSW disability advocacy sector through quality improvement, collaboration and innovation.
3. Build stronger networks and learning opportunities for the NSW disability advocacy sector.

Grant applications must demonstrate how the proposed project will contribute to the development of the NSW disability advocacy sector and how the project will assist people with disability to actively engage in their communities by meeting **at least one** of the program objectives.

Please select a Grant objective that you intend to meet through the delivery of your project/activity. *

- Increase available supports to assist people with disability in NSW to actively engage in their communities in a more informed and empowered way.
- Further develop the NSW disability advocacy sector through quality improvement, collaboration and innovation.
- Build stronger networks and learning opportunities for the NSW disability advocacy sector.

At least 1 choice must be selected.

Please provide a brief overview of the proposed project/activity *

Word count:

Must be no more than 200 words.

Assessment criteria

Eligible organisations must meet the following assessment criteria to be considered for funding:

- demonstrated ability to meet the grant objectives and outcomes
- demonstrated capacity to deliver projects/activities for the target group (s)
- demonstrated value for money
- experience working with the target group (s)
- community links and engagement with relevant stakeholders (including government and non-government organisations) to deliver the proposed activities.

Criteria 1. demonstrated ability to meet the grant objectives and outcomes

Q1. Please tell us what you will do and how you will meet the grant objectives and outcomes you have selected?

To answer the question above, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

WRITTEN RESPONSE - Assessment Criteria 1: *

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Word count:

Must be no more than 200 words.

Please use headings in your response to identify different objectives and outcomes.

OR

PROVIDE A RECORDED RESPONSE - Assessment Criteria 1 (up to 1.5 minutes):

Attach a file:

Criteria 2. demonstrated capacity to deliver projects/activities for the target group (s)

Q2. Please outline your organisation's relevant work in the community where the proposal is targeted and how you will deliver your project/activity to the target group(s) you have selected. Use headings in your response.

To answer the question above, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

WRITTEN RESPONSE - Assessment Criteria 2: *

Word count:

Must be no more than 200 words.

OR

PROVIDE A RECORDED RESPONSE - Assessment Criteria 2 (up to 1.5 minutes):

Attach a file:

Criteria 3. demonstrated value for money

Q3. Please explain how you will achieve value for money?

To answer the question above, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

WRITTEN RESPONSE - Assessment Criteria 3: *

Word count:

Must be no more than 200 words.

OR

Application - Disability Advocacy Futures Program 2023/24

Form Preview

PROVIDE A RECORDED RESPONSE FOR Q3 (up to 1.5 minutes):

Attach a file:

Criteria 4. experience working with the target group (s)

Q4. Does your organisation have experience working with your selected target group (s)? Please tell us your experience working with your selected target group (s).

To answer the question above, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

WRITTEN RESPONSE - Assessment Criteria 4: *

Word count:

Must be no more than 200 words.

OR

PROVIDE A RECORDED RESPONSE FOR Q4 (up to 1.5 minutes):

Attach a file:

Criteria 5. community links and engagement with relevant stakeholders (including government and non-government organisations) to deliver the proposed activities.

To answer the question above, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

Q5. Please tell us about your community links and engagement with relevant stakeholders - including government and non-government organisations; and how this will help you deliver the grant project/activity? *

Word count:

Must be no more than 200 words.

OR

PROVIDE A RECORDED RESPONSE FOR Q5 (up to 1.5 minutes):

Attach a file:

You selected "Sector Development stream"

Application - Disability Advocacy Futures Program 2023/24

Form Preview

To answer the question below, you have the option to provide either a written OR audio response (you must not provide both). *Note: If you are attaching an audio file, please write "audio file attached" in the text box below.*

Q6. Please explain how will the project activities build development in the sector.

*

Word count:

Must be no more than 200 words.

OR

PROVIDE A RECORDED RESPONSE FOR Q6 (up to 1.5 minutes):

Attach a file:

Project Budget

* indicates a required field

Budget Information

- Eligible applicants can apply for a one-off grant funding from \$20,000 (minimum) up to \$100,000 (maximum); it can only be used for expenses/activities directly associated with the activity/project.
- More than one application can be submitted for consideration by an applicant. However, not all applications will be successful as each application will be considered individually through a competitive merit based assessment.
- DCJ may vary the distribution of packages depending on the number of funding applications submitted. DCJ may also offer successful applicants a package lower than the amount requested.

•

Applicants must clearly propose an accurate budget for their activity/project.

Please provide a breakdown of your proposed budget for your activity/project using the tables provided below.

Applicant's Budget (Grant Funding): In this table list all expenses that you would pay for with DAFP Grant Funding. **List all items as exclusive of GST.**

Example:

- Brochure printing \$50.00
- Newspaper Ad \$150.00

Note: The above are examples only

Applicant's In-Kind Contributions: In this column list the dollar value of all other resources contributed to the activity/project. Resources to list in this column include:

- money spent by your own organisation
- sponsorship

Application - Disability Advocacy Futures Program 2023/24

Form Preview

- cash donations
- in-kind contributions (goods and services you have received but have not paid for, for example a room hire fee waived by a venue)

Grant Funding Exclusions

Organisations must use the grant funds, including any interest earned, for the purposes of the grant.

Items or activities that funding cannot be used for include, for example:

- Any activity of a commercial nature that is for profit
- Existing debt or budget deficits
- Capital works, including building work
- Permanent salaries/wages (costs for temporary tutors/instructors for your program or activity can be included)
- Permanent equipment purchases, for example tables and computers
- Business as usual costs or general operating expenses
- Programs or activities that encourage gambling such as bingo, or the consumption of alcohol
- Programs and activities coordinated by NSW Government Departments and Statutory Authorities
- The same project twice. For example, two different organisations cannot apply for funds for the same program or activity.

Please confirm that you will NOT spend grant funding on the above excluded items. *

- Yes, we will NOT spend grant funding on the above excluded items
- No

Applicant's Budget (DAFP Grant Funding)

List items that you will pay for using grant funding

Expenditure - Grant funded expenses.	\$ Item amount
	\$
	\$
	\$

Total value: DAFP Grant Funded Budget Total

Total DAFT grant expenditure amount *

\$

This number/amount is calculated.
Minimum \$20,000 - Maximum \$100,000

Applicant's In-Kind Contributions

Application - Disability Advocacy Futures Program 2023/24

Form Preview

List the items your organisation will pay for, including donations and in-kind contributions

\$ Item amount

	\$

In-Kind Contributions Total

Total Value: Applicant's In-Kind Contributions

\$

This number/amount is calculated.

Total estimated cost of your project

Total estimated Project Cost *

\$

This number/amount is calculated.

total budgeted cost (dollars) of your project?

Lower grant funding amount

As per the [Disability Advocacy Futures Program \(DAFP\) 2023/24 Special Purposes and Projects; Sector Development Grant Guidelines](#), DCJ may offer successful applicants a package lower than the amount requested, given the limited pool of funding available.

Would you accept delivering the proposed project with a lower funding amount than what you have requested above? *

- Yes
- No

Authorised Signatories

* indicates a required field

Signatories

If you are successful in this grant application, your nominated authorised signatories will also be responsible for signing the Grant Funding Agreement via DocuSign.

More information on authorised signatories is available here: [Authorised signatories for DCJ contracts and other legal documents](#).

You must nominate **two authorised signatories** for the applicant organisation.

Nominate Signatories

Applicant Organisation - First authorised signatory *

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Applicant Organisation - First Authorised Signatory - Title/Role in the organisation *

Applicant Organisation - First Authorised Signatory - Mobile Phone Number *

Must be an Australian phone number.

Applicant Organisation - First Authorised Signatory - Primary Email (must not be a group or generic mailbox) *

Must be an email address.

HINT: Please note, this is the email address that we will send the grant funding agreement to

Applicant Organisation - Second Authorised Signatory *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Applicant Organisation -2. Authorised Signatory - Title/Role in the organisation *

Applicant Organisation -2. Authorised Signatory - Mobile Phone Number *

Must be an Australian phone number.

Applicant Organisation -2. Authorised Signatory - Primary Email (must not be a group or generic mailbox) *

Must be an email address.

Nominate a Reviewer (optional)

You can nominate another staff from your organisation to review the Grant Funding Agreement before your authorised signatories sign the document via DocuSign.

The nominated reviewer can be your organisation's legal officer or chief finance officer. They will be the first to receive a copy of the Grant Funding Agreement via DocuSign. Your authorised signatories won't be able to sign the agreement until the authorised reviewer complete their review.

Applicant Organisation's Reviewer

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Application - Disability Advocacy Futures Program 2023/24

Form Preview

Applicant Organisation's Reviewer - Title/Role in the organisation

Applicant Organisation's Reviewer - Email (must be individual address)

Must be an email address.

Applicant Organisation's Reviewer - Phone Number

Must be an Australian phone number.

Applicant Declaration

* indicates a required field

Organisation Declaration

As an authorised representative of your organisation, please confirm below that you agree to the following statements:

- I have read and understood the information in the introductory section of this Application form.
- I certify that the information in this Application form is true and correct.
- I declare that I have the appropriate authority to submit this Application form on behalf of my organisation.
- I agree that details provided in this Application form will be used by NSW Department of Communities and Justice for informative and evaluation purposes.

I agree to the above declaration *

Agree

Name of authorised person making declaration *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Position *

Organisation name: *

Organisation Name

Application Submission

Before submitting your application please make sure you have checked over your application.

Application - Disability Advocacy Futures Program 2023/24

Form Preview

You will not be able to submit your application until all the compulsory questions are completed.

Once you have submitted your application, no further editing or uploading of support materials is possible.

When you submit your application, you will receive an automated confirmation email with a copy of your submitted application attached. This will be sent to the email you supplied under Organisation's Details.

If you do not receive a confirmation of submission email then you should presume that your submission has **NOT** been submitted.

If you have any queries about this grant program or the application process please email [DAFP grant program team](#) and quote your application reference number.

You are not Eligible for this Grant

The response you have provided does not meet the program guidelines and unfortunately you are ineligible to apply for this grant.