

Multicultural Amenities - Suggested answers are highlighted in green

Note: I experienced errors with the application portal, including timeouts and technical issues. Please remember to save your application progress while filling it out and note the application ID. This will help you return to where you left off if you encounter similar problems.

Page 1: **Applicant's email** - Enter your email address.

Page 2: **Existing Grant Recipient** – select “No”.

Page 3: **Applicant Details**

- Are you applying as a Trustee on behalf of a Trust? – Yes
(the parish representative is authorised to apply for the grant on behalf of the ACPT).

Upload the signed Trust deed - Contact your [SAP regional contact](#) to obtain your signed Parish Trust deed (this is typically referred to as Master Trust Ordinance).

- Does the Trustee have an Australian Business Number (ABN)? - Enter 95 690 399 815 and validate.
- Business name of the Trustee – same as legal entity.
- Does the Trustee have any of the following types of Incorporation Number: Australian Company Number (ACN), Registration Number, Indigenous Corporation Number (ICN), Incorporated Association Number (IAN)? – No
- Please Contact your [SAP regional contact](#) to obtain your Specific ACPT ABN for this (Please contact your Regional Manager to obtain the specific ACPT ABN for your Parish Trust. Note that this ABN differs from both the generic ACPT ABN (88 604 016 491), and the parish ABN used for day-to-day activities. Once obtained, enter and click 'Validate' to prefill the necessary details.

- Provide the Trusts registered business name – select “same as legal entity”.
- What is the registered business address and main contact details of the Organisation? – Please enter the parish contact details and complete parish physical address in the following questions – example: Lot A, 41 Beresford Road STRATHFIELD NSW 2135 / or when you enter physical address it brings up lot details – check and accept.
- Postal address – choose accordingly or enter complete parish details.
- Is the registered business address and main contact details supplied above different for the Trust? – No
- What is the Applicant's financial email address for the receipt of Department of Home Affairs payment advice should the Application be successful? Enter acpt@sydney.anglican.asn.au
- Does the Applicant operate as a not-for-profit? – Yes

Page 4: Eligibility Requirements

- What is the Applicant's entity type? – Statutory Entity (this is the most applicable option to describe the Trust).
- Is the Applicant able to provide documentation to support the entity type? – select Yes, and upload the trust deed that you will obtain from the regional manager.
- Organisation Type - Is the Applicant an Indigenous organisation? Non-Indigenous organisation
- National Redress Scheme: Confirm your organisation (or your project partner organisation) is not included on the National Redress Scheme's website on the list of 'Institutions that have not joined or signified their intent to join the Scheme'. – I confirm
- Workplace Gender Equality: Please confirm you are NOT an organisation, and if applicable, your project partner/s is/are NOT an organisation, included on the Workplace Gender Equality Agency [website](#) on the non-compliant list. – I confirm
- Parish to select the appropriate answer based on your project application:

Level of contact with children

Contact with children is direct or an expected part of the proposed activity

Contact with children is direct or an expected part of the proposed activity

Contact with children is irregular or unplanned for the proposed activity

Not applicable - the proposed activity does not interact with children

- Child Safety: Choose the first answer as applicable.

Confirmation

I confirm Child Safe measures for direct/expected contact will be in place prior to activity start

I confirm Child Safe measures for direct/expected contact will be in place prior to activity start

Child Safe measures for direct/expected contact will NOT be in place prior to activity start

- **Organisation Revenue ***

Confirm your organisation's revenue in either the 2022-23 or 2023-24 financial year was less than \$500,000. - I confirm (for the Multicultural Amenities stream only those parishes with revenue as defined by the parish net operating receipts of less \$500,000 in the parish financial statement for either 2022 or 2023 are eligible to apply)

Multicultural celebration stream: Confirm your organisation's revenue in either the 2022-23 or 2023-24 financial year was less than \$1,000,000.

Multicultural Social and Intercultural Connections stream: Confirm your organisation's revenue in either the 2022-23 or 2023-24 financial year was less than \$500,000

- **Maximum Paid Employees ***

Confirm that the maximum number of paid, fulltime employees in either the 2022-23 or 2023-24 financial year was no more than 2. - I confirm (only those parishes with no more than 2 full time employees are eligible to apply)

Multicultural celebration stream: Confirm that the maximum number of paid, fulltime employees in either the 2022-23 or 2023-24 financial year was no more than 5.

Multicultural Social and Intercultural Connections stream: Confirm that the maximum number of paid, fulltime employees in either the 2022-23 or 2023-24 financial year was no more than 2.

Relevant Persons - Has any senior official or person to be involved in delivering the Activity been involved in any of the following events in the last 5 years?

Select - *None of the above apply and there is no adverse information on any relevant person associate with this entity.*

Reportable Events - Select the appropriate box(es) that relate to any events to which your entity may have been subjected in the last 5 years.

Select - *None of the above events apply and there is no adverse information on my entity.*

Does the Applicant have the following documents? Choose

Note: You may be required to provide copies of the below documentation within 7 days upon request. *(be prepared to provide the same when requested)*

1. Documented organisational and financial policies and procedures. *Yes*

(if required - parish to provide parish account, financials and reference SDS Prescribed Financial Statements requirements)

2. Business plan and/or strategic plan. *Yes*

(provide a business plan how your community will benefit from this project and the objectives will be met)

3. Risk management plan. *Yes*

(provide a risk management plan how you perceive, anticipate, mitigate risks from undertaking this project, and over all how you manage risk on regular basis to provide safe and inclusive space for all members of the community).

Page 6 **Project/Activity Details**

- Provide a short title of your Application for this Project/Activity. – write in approx 38 words, 250 characters
- Provide a brief description of your project or the services to be delivered and how it will contribute to the objectives outlined in the Grant Opportunity Guidelines. – write in approx 150 words, 1,000 characters
- Service area: Select SA3 2021 > NSW > and the correct service area(s) of your parish.

Service Area Type	Choose state to view areas
SA3 2021	NSW
Available service area/s <input type="checkbox"/> Albury <input type="checkbox"/> Armidale <input type="checkbox"/> Auburn <input type="checkbox"/> Bankstown <input type="checkbox"/> Bathurst <input checked="" type="checkbox"/> Baulkham Hills <input type="checkbox"/> Blacktown <input type="checkbox"/> Blacktown - North <input type="checkbox"/> Blue Mountains	Selected service area/s * <input checked="" type="checkbox"/> Baulkham Hills, NSW

- What amenities will be upgraded? – choose from the list or select **other** and furnish the details.
- What amenities will be upgraded (**part 2**)? Did you select "Other" in the previous question?

If YES, please describe the amenities to be upgraded below in approx 15 words, 100 characters.

- Funding limits - I confirm

Multicultural celebration stream: select Multicultural festival or event / Part 2 – No

Event start and end date (optional) – fill as applicable

Are you applying for multiple events in this application? - answer as applicable.

Multicultural Social and Intercultural Connections stream: select Cultural or intercultural youth, parent, woman's or men's group program as it is most suited to many programs the parish may offer and can be grouped/listed under this category, choose what seems fitting in keeping the program guidelines and the objectives of the grant.

Page 7 Financials

Provide a breakdown of the requested grant funding for each previously selected service area/s.

- Provide bank account details for receipt of grant payments should the Application be successful.

Provide **Sydney Diocesan Services bank account** details:

BSB: 032-008 / Account number 880096

Page 8 Assessment Criteria

Before applying for the grant, prepare a clear plan outlining which grant stream you will target. Ensure you have answers to the following questions, addressing how you will meet each point in relation to the grant objectives and your needs if your grant request is approved:

Criterion 1: **Need**

- What community group(s) will participate in your grant activity?
- What problems are facing this community and what does it need help with?
- How are these needs linked to the grant program objectives?

Criterion 2: **Outcomes**

- What activity(s) will you deliver if successful?
- How will this activity help your community?
- How will your activity contribute to the grant program objectives?

Criterion 3: **Capacity**

- How will you ensure relevant community groups participate in your grant activity or access amenities obtained from your grant activity?
- What other organisations or stakeholders will you work with to deliver your activity?
- Have you delivered a similar activity in the past?

Page 9: Additional details

Consortium Arrangements

Does the Applicant plan to deliver the Project/Activity as the lead agency of a consortium?

Select - No

Consortium Arrangements - Letter of Declaration

Does the Applicant plan to deliver the Project/Activity as the lead agency of a consortium?

Select - No

Are you undertaking Building Works?

If YES, please attach proof of ownership and/or approval from owner for Building Works to be undertaken.

Select Yes or no as applicable, and request the supporting letter from your regional point of contact.

Community of Practice participation

Will you be requesting funding to cover costs associated with participation in the Community of Practice?

If YES, you must include costs for this in the Budget question below. The maximum amount you can request for this should be based on your administrative and staffing costs for up to 30 hours over the duration of your 18-month grant.

Budget Table 1 – Complete the table accordingly.

Please provide a breakdown of budget items and costings for your proposed activity.

Ensure that the sum of all budget items equals the total funding amount requested in the "Financials" section earlier in the form.

Note the eligible expenditure items include but are not limited to:

- staff salaries and on-costs that can be directly attributed to the provision of the funded grant activity
- costs of project related planning, administration, consultation, coordination, monitoring and reporting
- costs of suppliers, consultants, specialists/experts and contracted labour undertaking eligible grant activities
- employee training for paid and unpaid staff including Committee and Board members which is relevant, appropriate and in line with the grant activity
- purchase of materials required to deliver eligible project activities (for example, fencing materials, equipment and so on)
- costs of obtaining required permissions
- venue hire, insurance, catering, marketing and promotion for events and programs

- up to 25% of the grant can be used for operating and administration expenses that can be directly attributed to the provision of the funded grant activity such as rent, telephones, computer, website, software, utilities, postage, stationery and printing, accounting and auditing, domestic travel and accommodation costs, as well as the costs related to project planning and management, consultation, and monitoring. You may also request costs for up to 30 hours for paid employees to participate in the Community of Practice.

Under Multicultural celebrations, and Social and Intercultural Connections stream: You cannot claim for facility upgrades but only celebrations and costs associated with the respective eligible expenditure guidelines.

Page 10 - **Attachments**

Letter/s of support for your application (optional)

If available, please attach letter(s) from your State or Federal Member for Parliament, local councillor or Mayor or other senior community members outlining support for your application.

While this is optional, we encourage the applicants to try and get it from the local councillor or MP to add weightage in the assessments.

Page 11: **Contact details**

Applicant is the parish representatives contact details and alternate contact details.

Page 12: **Declaration**

Do you have any conflicts of interest that may occur related to or from submitting this application?

If you follow the guidelines for this grant stream and read through the conditions listed in the page, and if there are no deviations or variances select NO.

Program feedback example below:

SYDNEY ANGLICAN PROPERTY

Program Feedback

How did you hear about the grant opportunity? *

Advertisement

Did you read the grant opportunity guidelines? *

During the application process

We welcome any additional feedback on the guidelines.

Your response is limited to 750 characters including spaces and does not support formatting.

Write your feedback professionally.



(Limit: approx 113 words, 750 characters)

35 characters of 750 used

How satisfied were you with the process of applying for a grant? *

Satisfied

We welcome any additional feedback on the application process.

Your response is limited to 750 characters including spaces and does not support formatting.

If the terms and conditions and criteria are straightforward, it will help. (Write your professional and constructive feedback.)



Please provide an estimate of the time taken to complete this Application Form, including:

- Actual time spent reading the guidelines, instructions and questions
- Time spent by all employees in collecting and providing the information
- Time spent completing all questions in the Application Form.

The total time should be factored into the application process and included as part of the time you can claim when submitting the grant.

Our (SAP) Preparation Time: The 29 hours we invested in reading, discussing, preparing the documents and doing multiple mock applications to furnish all the details to guide you.

Your Time: The time you will spend gathering support letters, discussing and coordinating with stakeholders, and completing additional tasks required for the application.

Provide [program feedback and submit](#).

PRASANNA KUMAR S
Manager - Compliance & Support