

# 2024-25 Scholarship Grant Application

## Form Preview

### Form Explanation

Before commencing an application, please read the 2024-25 Aboriginal and Torres Strait Islander Grant Program Guidelines.

Please refer to [2024-25 Aboriginal and Torres Strait Islander Grant Guidelines](#)

The Grant Program aims to support 3 of the Core Focus Areas from the ACT Aboriginal and Torres Strait Islander Agreement 2019-2028. The first is **Cultural Integrity**, where a society supports the aspirations of all Aboriginal and Torres Strait Islander people and contributes to the building of respectful, fair, and sustainable communities. The second is **Community Leadership**, where Aboriginal and Torres Strait Islander people have a strong voice, are decision makers on issues that impact them and lead in the achievement of positive life outcomes. Finally, **Lifelong Learning**, where respect is given to preserving the world's oldest living cultures which enhances social inclusion and empowers Aboriginal and Torres Strait Islander people to fully engage in lifelong learning and positive generational experiences.

If you would like to attend an information session on the 2024-25 Aboriginal and Torres Strait Islander Grant Program, please contact the CSD Grants by email [CSDGrants@act.gov.au](mailto:CSDGrants@act.gov.au).

If you have any questions about the application process or require assistance in filling out the form please contact the ACT Office for Aboriginal and Torres Strait Islander Affairs by email [OATSIA.Grants@act.gov.au](mailto:OATSIA.Grants@act.gov.au).

### Eligibility Requirements

\* indicates a required field

#### Entity Type

You need to read the 2024-25 Aboriginal and Torres Strait Islander Grant Program Guidelines before you start your application.

Please refer to [2024-25 Aboriginal and Torres Strait Islander Grant Guidelines](#)

You can only apply for a grant if you meet the eligibility criteria. Please do not complete this application form if you do not meet all of the eligibility criteria.

You can contact the ACT Office for Aboriginal and Torres Strait Islander Affairs by email: [OATSIA.Grants@act.gov.au](mailto:OATSIA.Grants@act.gov.au)

#### Individual Eligibility

Individuals that are applying for a Scholarship Grant must be 18 years or older.

Please note a lack of detail and supporting evidence may deem your application ineligible.

**Do you live in the Canberra region? \***

☐ Yes

☐ No

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The Canberra Region is defined in the Canberra Region Local Industry Participation Policy as the area comprising the Australian Capital Territory and the New South Wales Member Councils including Bega Valley, Eurobodalla, Goulburn-Mulwaree, Hilltops, Queanbeyan-Palerang, Snowy Monaro, Upper Lachlan and Yass Valley.

**Please upload a copy of an ACT or NSW Driver's License or Proof of Identity Card.**

\*

Attach a file:

**Please upload evidence of Canberra region residency.** \*

Attach a file:

Evidence of residency must state your current address, have a date of issue displayed and must not be older than 6 months. For example a copy of a recent rates notice, rent or utility statement or drivers licence.

**Are you an Aboriginal and/ or Torres Strait Islander person?** \*

☐ Yes ☐ No

Applicants must provide confirmation of their Aboriginal and/or Torres Strait Islander identity as a requirement of grant eligibility criteria.

**Have you received funding from another source to deliver or provide the same or similar activity?** \*

☐ Yes  
☐ No  
☐ Not sure

**If yes, please provide details:**

**Have you received any grant funding previously from the Community Services Directorate?** \*

☐ Yes  
☐ No  
☐ Unsure

## Cultural identity

For the purpose of this process, eligibility is determined by the applicant meeting the following criteria:

- being of Aboriginal and/or Torres Strait Islander descent;
- identifying as an Aboriginal and/or Torres Strait Islander person; and
- are accepted as being of Aboriginal and/or Torres Strait Islander descent in the community where they currently or have previously lived.

Applicants may submit one or more of the below methods of confirmation:

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- Confirmation of Aboriginality (COA) This is a document issued by a registered Aboriginal Community Controlled Organisation (ACCO) in accordance with the legal definition.
- Letter of recognition from a registered ACCO identifying that the person is known and accepted as an Aboriginal and/or Torres Strait Islander person.
- Letter from a recognised Elder who has relevant cultural authority, that identifies that the person is known and accepted by the community as an Aboriginal person.
  - Communal recognition as an Elder, generally through a registered ACCO, will be considered in determining the relevance of the claims in line with the grant requirements.

### Please upload evidence of your Aboriginal and/or Torres Strait Islander cultural identity. \*

Attach a file:

Overdue reporting or acquittals for any previous Community Services Directorate grants will make your application ineligible.

To check the status of a previous grant with the Community Services Directorate click the My Submissions link near the top left of the screen.

### Have you met acquittal conditions for previous funding received from the Community Services Directorate? \*

- ☐ Yes
- ☐ No
- ☐ Unsure
- ☐ No previous grant funding received

If you have previously received a grant from the Community Services Directorate grant and you are unsure if acquittal obligations have been met, then please contact the CSD Grants Team at [CSDGrants@act.gov.au](mailto:CSDGrants@act.gov.au) for assistance to identify any outstanding acquittal reporting.

### Please provide details of any Community Services Directorate grants you have received.

Grant Program	Grant ID Number	Funding acquitted?

## Contact Details

\* indicates a required field

Individual applicants must be over the age of 18 to apply for this grant.

### Applicant \*

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

### **Applicant Primary Address \***

Address

  

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

### **Applicant Postal Address (if different from above)**

Address

  

### **Applicant Primary Phone Number \***

Must be an Australian phone number.

### **Applicant Primary Email \***

Must be an email address.

### **Applicant Other Phone Number \***

Must be an Australian phone number.

### **Are you completing this application on behalf of a person as a parent, carer or guardian? \***

☐ Yes ☐ No

### **Are you completing this application on behalf of a person with disability?**

☐ Yes ☐ No

### **Which age group are you in? \***

- ☐ 18-19 years
- ☐ 20-24 years
- ☐ 25-34 years
- ☐ 35-44 years
- ☐ 45-54 years
- ☐ 55-64 years
- ☐ 65-74 years
- ☐ 75 years or over

### **Do you wish to identify as any of the following: \***

- ☐ Culturally and linguistically diverse
- ☐ Person with disability

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- ☐ Lesbian, gay, bisexual, transgender, intersex and/or queer (LGBTIQ)
- ☐ None of the above

### Gender \*

- ☐ Girl, woman or female
- ☐ Boy, man or male
- ☐ (I / They) use a different term (please specify in the field below)
- ☐ Prefer not to answer

### (I / They) use a different term (please specify)

### Name of person responsible for completing the form on behalf of the applicant \*

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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### Person responsible contact number \*

Must be an Australian phone number.

### Person responsible email \*

Must be an email address.

### Relationship to applicant \*

## Project Details

\* indicates a required field

Applicants **must** provide evidence of course enrolment. This includes the following:

#### Existing Enrolment:

Acceptable forms of evidence include any document from the training organisation that clearly identifies you and confirms that you are enrolled and studying such as official correspondence from the organisation; receipt of fees; or evidence of assessment and grade.

#### Intent to Enrol:

Acceptable forms of evidence include a letter from the training organisation confirming your intent to enrol.

#### Acceptance of enrolment in a qualification or bridging program:

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Acceptable forms of evidence include a letter from the training organisation confirming your enrolment. Receipt of fees if you are clearly identified along with the course you are enrolled in.

### **Childcare:**

Acceptable forms of evidence include a letter from the Child Care Organisation that clearly identifies you and confirms that your child is enrolled in care at the times you are studying or receipt of fees (with you clearly identified as the account holder and the times your child is in care). Please note, the cost of full-time Child Care is excluded from these grants.

### **IT Equipment (if applicable):**

Acceptable forms of evidence include quotes, catalogues or website printouts from IT suppliers. Funding for IT equipment to support access to training will not exceed \$1,000.

Applications for IT equipment will not be considered if the application has received IT equipment in grant rounds in the previous two years (2023 and 2024).

***Please note that lack of clarification and supporting evidence may deem your application ineligible.***

### **What part of your study/training is the grant supporting? \***

- ☐ Existing enrolment
- ☐ Intent to enrol
- ☐ Acceptance of enrolment in a qualification or bridging program
- ☐ Childcare at the time you are studying
- ☐ IT Equipment (if applicable)

## Study/Training Summary

### **Study/Training Title \***

Name of Course and the Level of qualification/study (example Certificate IV, Diploma)

### **Course Start Date \***

Must be a date.

### **Course End Date \***

Must be a date.

### **Please provide a brief description of your study/training. \***

What do you plan to do? Please limit your response to 200 words.

### **Please upload course enrolment form from a registered training provider.**

Attach a file:

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**I have or intend to enrol in the course that I am applying for? \***

If you have not yet enrolled, please provide a brief description when you expect to enrol.

### Assessment Criterion

Please provide a response demonstrating how your proposal meets the following criteria (please limit each response to 200 words).

**Capacity: Please demonstrate how the individual has the capacity to manage the funding. \***

Word count:

You may wish to describe the things that will help you achieve your goal, such as a study plan (including how you will allocate time to your course), general skills (time-management), technical skills (relevant to the field of study), and any supports you will use (e.g., family, childcare if relevant).

**Outcomes - Please demonstrate a clear outcome for the recognised training courses or programs. \***

Word count:

You may wish to describe the benefits that this course will have on your life, and how that contributes to the Agreement Significant Focus Area of "Life Long Learning".

**Need - Please outline how the proposal demonstrates your current need for this funding and outlines how the initiative or program will benefit beyond the funding period. \***

Word count:

You may like to describe why you need this grant. Also consider what would happen if you didn't receive a grant now, or in the future. Also, what are the expected long-term benefits of this activity on your life, the lives of your family and/or the ACT Aboriginal and Torres Strait Islander Community.

### Study Timeframe

#### Milestone Description

#### Completion Date

	Must be a date

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### Budget Information

\* indicates a required field

**Have you applied for any other grants to fund this project? \***

☐ Yes ☐ No

**If yes please provide details**

**Will you receive any other support for this project? \***

☐ Yes ☐ No

For example In-kind support is a donation of goods or services, time or expertise rather than cash or appreciated property which is converted into a dollar amount.

**If yes please provide details**

**If offered a grant less than the amount you have requested, would you be able to proceed with your study/training? \***

☐ Yes ☐ No

**Please provide a brief explanation for your answer. If you answered yes, please explain how you will continue with your study/training. \***

### Budget

Individuals may apply for a grant up to a maximum of \$5,000.

The value is for one project or initiative only and is non-recurring.

### How to complete the budget

Please refer to the below information of how to complete the expenditure description of all items you are seeking funding for the activity/project.

**Item of Expenditure** - Please provide a description of each item/activity that will be purchased as part of this project.

**Grant Amount Requested (\$)** - Please advise the grant funding amount for each item/activity you are aiming for.



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**Other Funding Sources and Contributions** - Please advise if the listed item will also be funded by another source, using the drop-down to select the most appropriate funding source.

**Other Funding Sources and Contributions Amount (\$)** - Please advise the funding amount being contributed from other sources.

**Total Project Amount (\$)** - Total value/cost of each item listed.

*\* Your budget should be broken down to show what the grant funding will be spent on and supported by things like quotes, links to websites etc to demonstrate the costs for the items you are requesting.*

### Budget

In the table below please provide a breakdown of all sources of funding you expect to contribute to this activity/project.

All amounts should be inclusive of GST.

Please don't add commas to figures, eg. write \$1000 not as \$1,000.

Item of Expenditure	Scholarship Grant Amount Requested	Other Funding Sources and Contributions	Other Funding Sources and Contributions Amount	Total Project Amount	Notes
Such as course fees, text books, IT equipment (Laptop)	Must be a dollar amount.	Select from the dropdown list where this funding is coming from	Must be a dollar amount.	Must be a dollar amount This number/amount is calculated.	Additional comments on item
	\$		\$	\$	
	\$		\$	\$	
	\$		\$	\$	

### Budget Totals

**Total Scholarship Grant Amount Requested**

\$

This number/amount is calculated.

**Total Other Funding Sources and Contributions Amount**

\$

This number/amount is calculated.

**Total Scholarship Project Amount**

\$

This number/amount is calculated.

### Quotes and Supporting Information

Quotes may take the form of catalogue price lists or similar and may be scanned and uploaded or provide an accessible link to the quotation as part of the application.

Quotes can strengthen your application.

#### Upload Quotes

Attach a file:

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If you would like to include website links for further information, please include in the table.

Item/Supplier	Website
	Must be a URL.

### Additional Information

Please upload any additional information or documentation that may support your application. For applicants applying as individuals please consider attaching a CV and letter of support/ referee reports to support the application.

**Please upload any additional information or documentation that may support your application.**

Attach a file:

### Feedback, Review and Submit

\* indicates a required field

### Certification - Individuals

I certify that to the best of my knowledge the statements made within this application and the information provided is true and correct.

I understand that if the Community Services Directorate approves the grant, I will be required to accept the terms and conditions of the grant as outlined in the grant guidelines, application form and Letter of Offer.

I understand the Territory may wish to contact me to seek feedback on the application form.

**Name \***

Title

First Name

Last Name

**Date \***

**I agree if I am successful, the Territory may contact me to seek permission to publish information about my application and how the grant benefited me. \***

☐ Yes

☐ No

### Privacy Notice

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In compliance with the *Information Privacy Act 2014* (the Act) personal information on this form may be stored in the Community Services Directorate records and may also be used for statistical research, information provision and evaluation of services. Your personal information may be disclosed to other agencies and third parties for purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.

### Feedback

You are now coming to the end of your application process and before you **REVIEW** and click the **SUBMIT** button please take a few moments to provide some feedback.

We would value any feedback you may have regarding our online grants application process.

**Please indicate how you found the online application process: \***

☐ Very easy    ☐ Easy    ☐ Neither    ☐ Difficult    ☐ Very difficult

**How did you find out about the Aboriginal and Torres Strait Islander Grants Program? \***

- ☐ Social Media – Facebook
- ☐ Social media – Linked in
- ☐ Social media – other
- ☐ Our Canberra (printed or online)
- ☐ Newsletter
- ☐ ACT Government Grants Portal
- ☐ Community Partner Update
- ☐ ACT Government 'Staff News'
- ☐ CSD Yuma
- ☐ Word of mouth
- ☐ Other:

**Please provide us with any improvements and/or additions to the application process/form that you think we need to consider:**

Word count:

Must be no more than 100 words.