



Aboriginal Affairs

2019 NAIDOC Week Grants Application Question Guide

This Application Question Guide provides an overview of the questions you will be asked as part of your online application form for the NAIDOC Week 2019 grants round.

Refer to the question number, question type and hint in the below table to prepare your application. For further guidance on how to use the online system refer to the User's Guide and Frequently Asked Questions.

Who do I contact for further information?

For any questions regarding the application form, you should contact your nearest Aboriginal Affairs' regional office on the phone numbers below:

Batemans Bay:	02 4478 2678
Coffs Harbour:	02 5622 8826
Dubbo:	02 6887 4402
Sydney/Newcastle:	02 8362 6676

Alternatively, you can also call 1800 019 998 or email NAIDOCWeek@aboriginalaffairs.nsw.gov.au

APPLICATION QUESTION GUIDE

Question Number	Question Type	Hint
WHO CAN / CANNOT APPLY?		
1	<i>Required, Single Choice</i>	Choose the most relevant option based on the examples of (in)eligible organisations
ELIGIBILITY		
Organisation Status		
2	<i>Required, Single Choice</i>	Choose the most relevant option that describes the legal status of your organisation.
3	<i>Required, Single Choice</i>	Tell us if you are applying on behalf of an unincorporated organisation through an auspicing arrangement. If you are an auspicing organisation select 'yes'. We encourage the auspicing organisation to apply for the grant on behalf of the unincorporated organisation (the organisation being auspiced)
4	<i>Optional, Text Response</i>	Tell us the name of the unincorporated organisation you are auspicing. This question is optional, you only need to complete it if you answered 'yes' to Question 2.
5	<i>Required, Multiple Choice</i>	Select the option(s) that best describe your organisation. If 'other,' please specify in the box provided.
6	<i>Optional, Alpha Numeric</i>	If you have an Incorporation Registration Number, please tell us what it is. If you don't have a number, please leave this question blank.
7	<i>Required, Numeric</i>	If you have an Australian Business Number (ABN) or Australian Company Number (ACN), please tell us what it is and click the 'lookup' button. By clicking the 'lookup' button, it will check that you have entered the number correctly and populate the criteria in the box. Please check that the information in the box is correct.
PUBLIC LIABILITY INSURANCE		
8	<i>Required, Single Choice</i>	Tell us if you have Public Liability Insurance. The applicant organisation must be covered by Public Liability insurance of up to \$20 million. The insurance cover must be valid for the entire duration of the NAIDOC event being held. If your organisation is not covered, you will need to approach another organisation to sponsor your application so that your event will be covered under their Public Liability Insurance
PREVIOUS RECIPIENT OF FUNDS FROM ABORIGINAL AFFAIRS		
9	<i>Required, Single Choice</i>	Please tell us if you have previously received funding from Aboriginal Affairs. Select the relevant option.
10	<i>Optional, Text Response</i>	(up to 200 words) Type your text response. If you have received funding from Aboriginal Affairs, please provide us with a brief description. Include the name of the project, the funding amount and year the project was funded. Was the project(s) completed successful with all documentation provided to Aboriginal Affairs?

APPLICANT ORGANISATION CONTACT DETAILS

Organisation Name and Address Information

11	<i>Required, Text Response</i>	Tell us the registered name of your organisation. It should be consistent with the name listed on your Incorporation Registration or Australian Business Number.
12	<i>Required, Text Response</i>	Tell us the trading name of your organisation, it may be different or the same as your registered name, listed in question 11.
13	<i>Optional, Text response</i>	Tell us if you trade or operate using any other name. It may be a name that you are also commonly known as.
14	<i>Required, Alpha Numeric</i>	Please provide us with your business address. You can provide us with your street or postal address. You do not need to provide both.
15	<i>Required, Numeric</i>	Please provide us with a business phone number. It must be an Australian phone number and it must be able to be used during daytime hours. Include the phone number area code.
16	<i>Required, Alpha Numeric</i>	Must be a valid email address. This email address will be one of the ways the Program and Aboriginal Affairs staff will contact you and send you documentation relating to your application.
17	<i>Optional, Alpha Numeric</i>	Must be a valid URL / web address. This question is optional, you are not required to have a website. If your organisation has a website we would like to know its address.

Organisation Contact Details

18	<i>Required, Text Response</i>	Please tell us the name of the main contact person for your organisation. Select the salutation from the dropdown list, and provide the person's first and last name. Your organisation's main contact person could be the General Manager, CEO, President, Secretary, Treasurer or another person in your organisation.
19	<i>Required, Text Response</i>	Please provide the position title of the person who is the main contact for your organisation. For example are they the General Manager, CEO, President, Secretary, Treasurer etc.
20	<i>Required, Alpha Numeric</i>	Please provide us with the business address of your organisation's contact person. You can provide us with their street or postal address. You do not need to provide both. We recognise that this may be the same address as your business address listed in Question 13, but we provide this question in case the contact person's address is different to your organisation's business address.
21	<i>Required, Numeric</i>	Please provide us with a business phone number (include the area code) of your organisation's main contact person. It must be an Australian phone number and it must be able to be used during daytime hours.
22	<i>Required, Alpha Numeric</i>	Must be a valid email address. This email address will be one of the ways the Program and Aboriginal Affairs staff will contact the person who is your organisation's main contact. We may send them documentation relating to your application.

Project Contact Details		
23	<i>Required, Text response</i>	Please provide us with the name of a project specific contact person. List the person who will be the main contact for your project, this may be a different person to the person who is the main contact for your organisation.
24	<i>Required, Text response</i>	Please tell us the position title of the nominated project contact person.
25	<i>Required, Alpha Numeric</i>	Please provide the address of the project's contact person. This may be a street or postal address. You do not need to provide both. We ask this question as the address of the project contact person may be different to the address in questions 14 and 20.
26	<i>Required, Numeric</i>	Please provide us with a business phone number for your project contact person. It must be an Australian phone number and it must be able to be used during daytime hours. Include the phone number area code.
27	<i>Required, Alpha Numeric</i>	Must be a valid email address. This email address will be one of the ways the Program and Aboriginal Affairs staff will contact the person who is your nominated project contact. We may send them documentation relating to your application.
27 (cont.)	<i>Required, Alpha Numeric</i>	For revalidation purposes please re-enter Contact Person's email address.
PROJECT DETAILS		
Project Details		
28	<i>Required, Text Response</i>	(up to 10 words) Tell us the name of your project.
29	<i>Required, Text Response</i>	(up to 30 words). Briefly describe your project.
30	<i>Required, Date</i>	Start date for your project. Tell us when your project will start. It cannot start any earlier than 1 July 2019 or any later than 31 December 2019. You can use the calendar function attached to this question.
31	<i>Required, Date</i>	Completion date for your project. Tell us when your project will finish. It cannot finish any earlier than 1 July 2019 or any later 31 December 2019. You can use the calendar function attached to this question.
32	<i>Required, Currency</i>	Tell us how much you are seeking from the Program. The amount you are requesting must be a whole dollar amount, and between \$500 and \$3,000. Remember to include this amount in your budget table on page 8 of the application form.
33	<i>Required, Single Choice</i>	Please tell us if you have applied for, intend to apply for, or have received funds for this project from another source. Select the relevant option(s).
34	<i>Optional, Text Response</i>	(up to 200 words) this question is optional. If you have applied for, intend to apply for, or have received funds from another source to deliver this project please name the source of funds, name the funding program and describe what was funded or applied for.

35	<i>Required, Single Choice</i>	Select the relevant option. If you select 'Yes', or 'Not yet confirmed', you will be required to complete the questions on page 6 of the application form (questions 42 – 56). Follow the instructions on the application form if you have, or are likely to have project partners. If you do not have project partners you will not be required to complete page 6 of the application form (questions 42 – 56).
Location		
36	<i>Required, Dropdown List</i>	Please tell us which Local Aboriginal Land Council area your project will be implemented in. Select the Local Aboriginal Land Council from the dropdown list. If your project spans across multiple Local Aboriginal Land Councils, select this option from the drop down list and complete Question 38 below. To look up which Local Aboriginal Land Council area your project is in, go to www.alc.org.au
37	<i>Required, Alpha Numeric</i>	Tell us where the project will take place. It must be an Australian post code. List the address or suburb and postcode where your project will be implemented. The project must be in NSW.
38	<i>Optional, Text Response</i>	If your project spans multiple Local Aboriginal Land Council areas, please list the Land Council areas here.
Target Group or Beneficiaries		
40	<i>Required, Multiple Choice</i>	Please tell us who the project beneficiaries will be. Select one or more, most relevant options. Please ensure that the options selected are logical and relevant to your project.
41	<i>Required, Number</i>	Please tell us how many people your project is targeting, are likely to benefit or may come to your event.
PROJECT PARTNERS - Questions 42 – 56 are only required if you have project partners.		
Number of Project Partners		
42	<i>Required, Single Choice</i>	If you have project partners, tell us how many you have. Select the relevant option. If you have more than 2 project partners, you will need to upload a list of your project partners to your application form. If this is the case, ensure that you provide all the required information.
Project Partner 1		
43	<i>Required, Text Response</i>	Partner 1 - name of organisation
44	<i>Required, Text Response</i>	Partner 1 – name of contact person
45	<i>Required, Alpha Numeric</i>	Partner 1 – address of partner 1, can be street or postal address. Must be an Australian post code.
46	<i>Required, Numeric</i>	Partner 1 - please provide us with a business phone number (include the area code) for project partner 1. It must be an Australian phone number and it must be able to be used during daytime hours.

47	Required, Alpha Numeric	Partner 1 - must be a valid email address.
48	Required, Text Response	Partner 1 – tell us what the role of this partner will be. What will they do or be responsible for?
49	Required, Text Response	Partner 1 – tell us what this project partner's contribution will be to the project. Please briefly detail the financial or other contribution made by this project partner.
Project Partner 2 - If you only have one project partner, you are not required to complete Questions 48 - 54		
50	Optional, Text Response	Partner 2 - name of organisation
51	Optional, Text Response	Partner 2 – name of contact person
52	Optional, Alpha Numeric	Partner 2 – address of partner 2, can be street or postal address. Must be an Australian post code.
53	Optional, Numeric	Partner 2 - please provide us with a business phone number (include the area code) for project partner 2. It must be an Australian phone number and it must be able to be used during daytime hours.
54	Optional, Alpha Numeric	Partner 2 - must be a valid email address.
55	Optional, Text Response	Partner 2 – tell us what the role of this partner will be. What will they do or be responsible for?
56	Optional, Text Response	Partner 2 – tell us what this project partner's contribution will be to the project. Please briefly detail the financial or other contribution made by this project partner.
PROGRAM AND PROJECT OBJECTIVES - Questions 57 and onwards must be completed by ALL applicants, as per the instructions.		
Objectives and how they are being achieved		
57	Required, Text Response	(up to 200 words) Describe how the project celebrates Aboriginal history, culture and achievements and the broader objectives of NAIDOC; and/or how the event is aligned with the national theme of NAIDOC 2019. Refer to NAIDOC website if needed www.naidoc.org.au
58	Required, Text Response	(up to 200 words) Describe how the project provides a benefit to the local Aboriginal community and where relevant across multiple Aboriginal communities.
59	Required, Text Response	(up to 200 words) Describe how the project promotes a greater awareness and understanding of Aboriginal history and culture within the broader local or regional community.
60	Required, Text response	(up to 200 words) Describe the type of activities that will be implemented and how the Aboriginal community will be involved in the project.
61	Required, Multiple Choice	Select one or more relevant options. How were Aboriginal people involved in the development of this project?
62	Required, Multiple Choice	Select one or more relevant options. What strategies will you use to promote your project, strategies you will use to engage or involve Aboriginal people and other community members?

63	<i>Optional, Multiple Choice</i>	Select one or more relevant options. This question is optional, only complete it if you are using social media. Tell us what type of social media you are using.
64	<i>Required, Text Response</i>	(between 10 and 200 words) Tell us what outcome(s) (or results) you will achieve as a result of this project. How will you measure these outcomes or results?
PROJECT BUDGET		
65. (A) Income		
<i>A</i>	<i>Required, Income Table,</i>	Tell us the CASH income you have or are seeking in the form of a grant for this project. Include the amount you are seeking from NAIDOC Week in this table (amount equals your response to Q32). Remember to include the GST you will be charged by suppliers in the amount of funds you request from this Program. A minimum grant of \$500 can be applied for, and a maximum grant of \$3,000 can be applied for. Add additional rows to the table, if required.
65. (B) Expenditure		
<i>B</i>	<i>Required, Expenditure Table</i>	Tell us the CASH expenditure you will have in relation to this project. List all related cash expenditures and costs by type, line item or activity. Add additional rows to the table, if required. Remember your cash expenditure should equal your total cash income (Table A above)
65. (C) In-Kind Contribution		
<i>C</i>	<i>Optional, In-Kind Contribution Table</i>	This table is optional. If you have in-kind contributions towards your project, please provide details. Please detail the equivalent cash value of all in-kind contributions (can be an estimated cash value). Add additional rows to the table, if required.
65. (D) Total Project Costs		
<i>Sub Total A</i>	<i>Required, Currency</i>	Subtotal of all sources of cash income in Table A. A minimum of \$500 can be entered here.
<i>Sub Total C</i>	<i>Optional, Currency</i>	Subtotal of all in-kind contributions (subtotal of equivalent cash value, can be an estimate), Table C
<i>Total Project Value</i>	<i>Required, Currency</i>	Add together Subtotal A and C, insert the total project value here.
<i>Sub Total B</i>	<i>Required, Currency</i>	Subtotal all cash expenditures in Table B. NOTE: for your budget to balance your cash expenditure must equal your cash income. If your budget does not balance review your budget tables.
66. Bank Account Details - This information is requested at application stage to reduce delay in payment and ensure that should your application for NAIDOC grant be successful the funds can be paid to your nominated bank account.		
<i>66. (A)</i>	<i>Required, Text Response</i>	Please provide your full Bank Account Name. If at this stage of the application you opt not to share this information, in this field please enter "To Be Advised". Should your application be successful you will need to provide the details of your bank account so funds can be paid.

66. (B)	<i>Required, Alpha Numeric</i>	Please provide your Bank Account BSB code as a 6-digit number (eg. "123456"). If at this stage of the application you opt not to share this information, in this field please enter "000000". Should your application be successful you will need to provide the details of your bank account so funds can be paid.
66. (C)	<i>Required, Alpha Numeric</i>	Please provide your Bank Account Number. If at this stage of the application you opt not to share this information, in this field please enter "123456789". Should your application be successful you will need to provide the details of your bank account so funds can be paid.
67.	<i>Required, Multiple Choice</i>	Select the option(s) of how your organization found out about the grant event. If 'other,' please specify in the box provided.
UPLOADS, CHECKLIST & DECLARATIONS		
<i>Upload</i>	<i>Optional</i>	You can attach documents to your application via this upload facility. Files should ideally be no more than 5mb each.
<i>Upload Checklist</i>	<i>Optional</i>	Tell us what you have attached, select one or more options, or 'other' if required.
<i>Application Checklist</i>	<i>Required, Multiple Choice</i>	Follow the instructions on the application form. Ensure that you read all of the options and select them, declaring that you have done each of the 4 actions. You must select all 4 options in order to submit your application.
<i>Applicant's Declaration</i>	<i>Required, Single Choice</i>	By reading and completing this Declaration you are confirming that you are authorised to submit the application, and that the information in the application is true and correct.
<i>Details of person submitting the application</i>	<i>Required responses</i>	By providing details of the person submitting the application, Aboriginal Affairs staff will be able to contact you should there be any questions or concerns with your application. Please follow the instructions provided on the application form. We request these details, as we recognise that the person submitting the form may not be the same person as the individual who is nominated as either the organisation or project contact.

Remember:

- **Save** your application form regularly.
- Your application can be completed in more than one session.
- Your application is not officially submitted until you '**review and submit**' your application. Simply hitting the save button in the online system does not officially submit your application for funding.
- Don't leave your application for funding until the last minute. Try and submit it well before the closing deadline.
- Once your application is submitted, you will receive an email confirming the lodgment of the application form.

Thank you and best of luck with your application.