

Seed Grant Application Form 2020

Form Preview

Eligibility check

* indicates a required field

You must answer yes to all questions to proceed further.

My organisation is registered in Australia as a not-for-profit and endorsed by the ATO as holding Deductible Gift Recipient Item 1 status *

Yes No

To determine if your organisation has DGR Item 1 status, enter your organisation's ABN into the ABN Lookup tool on the Australian Business Register.

My organisation has a safeguarding or child protection policy in place (and associated procedures, including data privacy) or is willing to develop a policy *

Yes No

My organisation and initiative is aligned with the funding principles and seeking to create impact across one or more of the target areas we are looking to fund *

Yes No

My proposed initiative responds to a clear need or gap, and ideally builds upon or interacts with existing solutions *

Yes No

Exclusions

Please note that grants will not be provided for:

- Programs or initiatives that require retrospective funding.
- Programs or initiatives where the main program benefits will be delivered outside of Australia.
- Auspicing arrangements, which are not permitted. Auspicing refers to the practice of an ineligible organisation (one that does not have Deductible Gift Recipient status) applying via an eligible organisation. The organisation applying for the grant must be the organisation that will run the initiative for which a grant is being sought.
- Capital grants for the construction or refurbishment of buildings.
- Academic research projects not linked to advocacy or service delivery programs.

Organisation details

* indicates a required field

Organisation name *

Organisation Name

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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.

Head office address *

Address

Organisation website *

Must be a URL.

Contact details

Primary contact person

Primary contact person for application *

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

Position *

Contact phone number *

Must be an Australian phone number.

Contact email address *

Must be an email address.

Secondary contact person

Secondary contact person *

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

Position *

Contact phone number *

Must be an Australian phone number.

Contact email address *

Must be an email address.

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Organisation leadership

Please provide the names, position titles, and LinkedIn profiles (or similar bio) for the three most senior members of your organisation.

Person 1 *	Person 2 *	Person 3 *
Title	Title	Title
First Name	First Name	First Name
Last Name	Last Name	Last Name
Position *	Position *	Position *
LinkedIn profile/bio address *	LinkedIn profile/bio address *	LinkedIn profile/bio address *
Must be a URL.	Must be a URL.	Must be a URL.

Attachments

Please upload your company logo *

Attach a file:

A minimum of 1 file and a maximum of 1 file may be attached.

Please upload your organisation's most recent annual financial report/statement *

Attach a file:

A minimum of 1 file and a maximum of 2 files may be attached.

Does your organisation have a child safeguarding/protection policy? *

- Yes (please upload policy below)
- No, but we are willing to develop a policy

Please upload your organisation's child safeguarding or protection policy *

Attach a file:

A minimum of 1 file and a maximum of 1 file may be attached.

Proposed initiative

* indicates a required field

Please provide an overview of your initiative *

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Word count:

Must be no more than 300 words.

How do you know there is a need for this initiative? *

Word count:

Must be no more than 200 words.

Optional - Please upload any supporting documentation such as data, research, reports etc indicating the need.

Attach a file:

A maximum of 3 files may be attached.

How will the grant assist your initiative? *

Word count:

Must be no more than 200 words.

What are the anticipated outcomes of your initiative? *

Word count:

Must be no more than 200 words.

Impact creation

* indicates a required field

Primary focus area

Select the primary target area you intend to impact with this funding: *

- Raising awareness and understanding of child exploitation, including online child sexual exploitation and creating a sense of urgency to act in business, across industry and society
- Investing in technology or other means of collaboration to help detect, monitor, report and prevent harm to children
- Investing in the delivery of effective educational, e-safety and child sexual exploitation and abuse prevention programs and initiatives particularly to at-risk and vulnerable youth and children and their families
- Investing in the provision of trauma-informed services including response, recovery and remedy to survivors in a way which complements and/or enhances existing services and puts children's needs first

Which stakeholder group does your initiative primarily focus on? *

- Indigenous children
- Children with disabilities
- Children in residential care
- Children living in poverty
- Parents or carers
- Vulnerable children of Culturally and Linguistically Diverse (CALD) backgrounds
- Refugee/migrant children
- Staff of child-focused organisations like schools, sporting facilities, not-for-profits

Secondary focus areas

Select one or more secondary target areas you intend to impact with this funding (if applicable):

- Raising awareness and understanding of child exploitation, including online child sexual exploitation and creating a sense of urgency to act in business, across industry and society
- Investing in technology or other means of collaboration to help detect, monitor, report and prevent harm to children
- Investing in the delivery of effective educational, e-safety and child sexual exploitation and abuse prevention programs and initiatives particularly to at-risk and vulnerable youth and children and their families
- Investing in the provision of trauma-informed services including response, recovery and remedy to survivors in a way which complements and/or enhances existing services and puts children's needs first

Please select any secondary groups your initiative focuses on:

- Indigenous children
- Children with disabilities
- Children in residential care
- Children living in poverty
- Parents or carers
- Vulnerable children of Culturally and Linguistically Diverse (CALD) backgrounds
- Refugee/migrant children
- Staff of child-focused organisations like schools, sporting facilities, not-for-profits

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- No specific focus on at-risk groups
 Other:

- No specific focus on at-risk groups
 Other:

Where will your organisation mainly provide programs or services to your primary target area, if granted the funding? If the initiative is Australia-wide, select 'National'. *

- Major city
 Inner regional
 Outer regional
 Remote
 Very remote
 National

Please use the ABS Remoteness Map to determine your location

How many children and young people will be helped through this initiative, as a result of this grant? *

Must be a number.

A higher number is not necessarily better, Please be realistic.

How many parents and carers will be helped? *

Must be a number.

Please list any other indicators that will be measured through this initiative

Must be no more than 50 words.

Please list a maximum of 3 additional indicators

How will the initiative continue to have a lasting impact beyond the period of the grant? *

Must be no more than 100 words.

How will the initiative engage and consult with children and young people in its design stage? *

Must be no more than 100 words.

Declaration

* indicates a required field

By submitting this application, you and your organisation agree to the following:

- I/We agree that the information given in this application is true and correct and I have the authority to submit the application on behalf of the above named organisation.

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- I/We agree that if successful, grant funds will only be used as outlined in this application and to create a community impact.
- I/We agree that Westpac Banking Corporation may collect personal information to enable it to administer the Impact Grants program. If the information requested is not provided the application may not be considered.
- I/We give permission for Westpac Banking Corporation to verify all information provided in the application form.
- I/We give permission for Westpac Banking Corporation to use our organisation name, photo(s), video(s) and description of our grant request in any communications and promotional activity undertaken by Westpac Banking Corporation.
- I/We agree that if our organisation is successful in receiving a Seed grant, and if later requested by Westpac Banking Corporation, our organisation will cease publicly referring to the fact that it had received a grant from Westpac Banking Corporation.
- I/We agree that if our organisation is successful in receiving a Seed grant, we will complete a report in October 2021 confirming how the grant funds were used and the impact that was achieved from the grant funds.
- I/We agree that the information given in this application can be shared with third parties for the purposes of administering the grant program.
- I/We agree to share learnings and data with other child-focused stakeholders to better safeguard, protect and care for children.
- I/We agree that personal information collected by Westpac Banking Corporation will be treated in accordance with Westpac Banking Corporation's [Privacy Policy](#) and Privacy Notice. I/We also agree that where I have provided personal information of another party, that such party has authorised their data to Westpac Banking Corporation and has been made aware of the Westpac Banking Corporation's Privacy Policy and Privacy Notice.
- I/We agree that, if my organisation is a Westpac Group customer, Westpac Banking Corporation may use information it already holds (such as bank account records) for the purposes of assessing this application.

*

- I confirm I have read the above declaration and accept the Terms & Conditions.

Name *

Title First Name Last Name

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