

**Harmony Week 2023 activities ($2,000)**

**Application Form**

**Deadline 4.00pm, Monday 10 October 2022**

The Office of Multicultural Interests (OMI) is administering this grant program on behalf of the Department of Local Government, Sport and Cultural Industries (DLGSC).

Please read the Harmony Week 2023 funding guidelines carefully and speak to a member of the OMI Funding team before completing an application.

Contact (08) 6552 1603 or email **grants@omi.wa.gov.au** for further information and assistance.

*Additional planning templates are available for your use on the ‘Project Planning’ page under the ‘Resources’ tab at www.omi.wa.gov.au*

**Select the way you learned about this funding round:** Choose an item.

## Eligibility

|  |  |
| --- | --- |
| Are you an incorporated association or not-for-profit organisation based in Western Australia, or an unincorporated not-for-profit association or community group being auspiced\* by an incorporated association or not-for-profit organisation based in Western Australia? | **Yes**  **No** |
|  |  |
| Is your activity being held within 11 – 26 March 2023? | **Yes**  **No** |
|  |  |
| Is your organisation or auspice body up to date with funding reporting with the Office of Multicultural Interests and the Department of Local Government, Sport and Cultural Industries? Organisations with outstanding reporting are not eligible. | **Yes**  **No** |

If you have answered **‘No’** to any of these questions, please contact the Grants Officer on   
(08) 6552 1603 or email **grants@omi.wa.gov.au**

\* For auspiced grants, a separate Auspice Agreement form must be submitted with your grant application. The Auspice Guidelines and the Auspice Agreement form are available on the ‘Community Grants Program’ page under the ‘Funding’ tab at www.omi.wa.gov.au

## Applicant details

**Organisation details**

This is the group undertaking the project or activity.

|  |  |  |  |
| --- | --- | --- | --- |
| Legal name of organisation: | Click here to enter text. | | |
| Trading name (if applicable): | Click here to enter text. | | |
| Postal address: | Click here to enter text. | | |
| Suburb: | Click here to enter text. | Postcode: | Enter text. |
| Telephone: | Click here to enter text. | | |
| Organisation website: | Click here to enter text. | | |

**Organisation contact**

This is the person legally authorised to enter into contracts on behalf of the organisation. This is generally the chairperson, president or equivalent officer.

|  |  |  |
| --- | --- | --- |
| Name: | Click here to enter text. | |
| Position: | Click here to enter text. | |
| Telephone: | Click here to enter text. | |
| Mobile: | Click here to enter text. | |
| Email: | Click here to enter text. | |
| These contact details may be placed on the OMI database: | | **Yes**  **No** |

Note: Personal information collected by OMI is handled in accordance with the *Privacy Act 1988*

**Project contact**

This is the person responsible for the daily coordination of the project or activity.

|  |  |
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| Name: | Click here to enter text. |
| Position: | Click here to enter text. |
| Telephone: | Click here to enter text. |
| Mobile: | Click here to enter text. |
| Email: | Click here to enter text. |

## Organisation overview

|  |  |  |
| --- | --- | --- |
| Does your organisation have paid staff? | | **No**  **Yes** |
| If yes, how many? | Click here to enter text. | |
|  | |  |
| Does your organisation have volunteers? | | **No**  **Yes** |
| If yes, how many? | Click here to enter text. | |
|  | |  |
| Does your organisation have members? | | **No**  **Yes** |
| If yes, how many? | Click here to enter text. | |

**In 50 words or less provide a summary of your organisation and community (if relevant), including its establishment in Western Australia and regular activities.**

Click here to enter text.

## 1. Activity details

**1.1) Activity name:** Click here to enter text.

**1.2) Activity delivery date/s:** Click here to enter text.

*21 March as the United Nations’ International Day for the Elimination of Racial Discrimination is a day reserved for reflection and discussion. Harmony Week activities of a celebratory nature are held in the week leading up to this date.*

**1.3) If applicable, select if your activity has a particular focus:**

|  |  |
| --- | --- |
| **Culture and arts**  Culture and arts activities must involve a professional artist or arts practitioner working with the community to design and deliver the activity. *You are required to attach or refer to information about the professional artist or arts practitioner.* | **Sport and active recreation**  Sport and active recreation activities must involve the community participating in a primary activity requiring physical exertion and/or physical skill. |

**1.4) Provide an outline of your planned activity. Include *who* your target audience or community is, *what* will be involved, and *when* and *where* your activity will be held.**   
*You can attach or refer to evidence of this, such as a ‘project plan’ or an ‘activity schedule’.*

Click here to enter text.

**1.5) Provide a brief overview of the people and the CaLD community or communities involved in planning and delivering your activity, including what and how they will contribute.**   
*You can attach or refer to evidence of this, such as letters of support from involved groups or a ‘project reach’ overview.*

Click here to enter text.

## 2. Participation

**2.1) Estimated number of people involved in the activity as participants or audience/spectators.**If your activity is targeted to a particular age group, specify figures within the appropriate age range. Otherwise, only provide total estimated figures.

|  |  |  |
| --- | --- | --- |
| Age group | Participants | Audience/spectators |
| Children 11 years and under | Click here to enter text. | Click here to enter text. |
| Adolescents 12-17 years | Click here to enter text. | Click here to enter text. |
| Youth 18-25 years | Click here to enter text. | Click here to enter text. |
| Adults 26-64 years | Click here to enter text. | Click here to enter text. |
| Seniors 65 years and over | Click here to enter text. | Click here to enter text. |
| Total | Click here to enter text. | Click here to enter text. |

**2.2) Estimated number of personnel and partners involved in planning and delivering your activity.**

|  |  |  |
| --- | --- | --- |
| Who | Number | Role/s |
| Paid staff | Enter text. | Click here to enter text. |
| Volunteers | Enter text. | Click here to enter text. |
| Organisations | Enter text. | Click here to enter text. |

## 3. Promotional plan and campaign involvement

**3.1) Provide an overview of how you plan to promote your activity to your target audience or community, and how your activity will acknowledge Harmony Week. Include details of when and how images, video and/or digital content of your activity may be included in the DLGSC Harmony Week campaign.***For example, 1 x advertisement in community newspaper; 300 x flyers using Harmony Week branding will be distributed to mailboxes in local area; digital flyer submitted to the DLGSC Harmony Week activities calendar.*

Click here to enter text.

## 4. Risk management

**4.1) List the three highest risks associated with delivering your activity, and how you plan to mitigate them. Include any risks relevant to your activity as a result of COVID-19 (such as health restrictions on public gatherings).***A ‘risk management plan’ may be attached to support your application.*

Click here to enter text.

## 5. Activity budget

Use the table below to list the expenses your activity will incur, identify the cash or in-kind income that will cover the expenses, and detail where other income is coming from.

The grant request will be **$2,000**.

Include your organisation’s cash and in-kind contributions.

**Do not include GST in your costings.**

|  |  |
| --- | --- |
| **Grant request amount:** | **$2,000** |
| **Total project amount:** | **$** Enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| (1)  Budget Items  (i.e. what the money will be spent on.) | (2)  This Grant Request Amount  ($) (ex. GST) | (3)  Other Funding Amount  ($) (ex. GST) | (4)  In-Kind Support - Estimate the dollar value of the in-kind support ($) | (5)  Source & Status of Other Funding or  In-kind Support.  State if confirmed  or unconfirmed |
| *Example only:*  *Printing and Promotion* | *$1000* | *$2000* | *$500* | *ABC Council  Confirmed* |
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| Total: | $2,000 | Enter text. | Enter text. |  |

## Child Safeguarding

Every child has the right to feel safe when participating in arts, cultural, sporting, recreation, and community activities. Organisations that undertake child-related work or activities have a duty of care to keep children and young people (those aged under 18 years) safe from harm. Protecting children and young people from harm, harassment, discrimination, and abuse is in part a legal requirement, an ethical obligation and a future requirement.

|  |  |  |
| --- | --- | --- |
| Does this activity or funding require an employee, contractor and/or volunteer from your organisation to undertake child-related work/activity (as defined in section 6 of the *Working with Children (Criminal Record Checking) Act 2004)* in delivering the activity? |  | **Yes**  **No** |

If the answer to the above question is **Yes**, your organisation will be required to complete the **DLGSC Child Safeguarding Self-Assessment**, then develop and implement a Child Safeguarding Improvement Plan to build capability in areas identified in the self-assessment.

The tool can be found at: <https://www.dlgsc.wa.gov.au/department/child-safeguarding>

The following resources are available to assist your organisation to respond to areas of improvement to protect children and young people:

**National Principles for Child Safe Organisations**   
[www.humanrights.gov.au/our-work/childrens-rights/national-principles-child-safe-organisations](http://www.humanrights.gov.au/our-work/childrens-rights/national-principles-child-safe-organisations)

**Commissioner for Children and Young People (CCYP) website**  
<https://www.ccyp.wa.gov.au>

## Organisation taxation and banking details

These details should be for the applicant or the auspice body accepting the grant on behalf of the applicant.

**Taxation details**

If the organisation does not have an ABN, please attach a completed ‘Statement by a Supplier form’. These forms can be accessed on the ‘Community Grants Program’ page under the ‘Funding’ tab at www.omi.wa.gov.au

|  |  |
| --- | --- |
| ABN: | Click here to enter text. |
| Is your organisation registered for GST? | **Yes**  **No** |

**Bank account details**

|  |  |
| --- | --- |
| Bank name: | Click here to enter text. |
| Bank branch:  (suburb) | Click here to enter text. |
| Name of bank account: (e.g. Youth Group Inc.) | Click here to enter text. |
| BSB number: (must be 6 digits) | Click here to enter text. |
| Bank account number: (up to 9 digits) | Click here to enter text. |

## Declaration

This declaration is made by the applicant or the auspice body on behalf of the applicant:

* I declare that I am currently authorised\* to sign legal documents on behalf of the organisation.
* If the application is being auspiced, the Auspice Guidelines have been read and understood by the authorised officer of both the auspice body and the group undertaking the project or activity, and a signed Auspice Agreement form has been attached.
* I declare that all the information provided is true and correct.
* I declare that the organisation is financially viable and is able to meet all accountability requirements.
* I give permission to the Office of Multicultural Interests, if applicable, to contact any persons or organisations in the processing of this application and understand that information may be provided to other agencies, as appropriate.
* I am aware that should this project receive funding, a grant agreement will be made to ensure projects are appropriately completed and accountability requirements are met.
* I agree to ensure that risk management strategies and appropriate insurances are in place (e.g. worker’s compensation, volunteers, professional indemnity, public liability, motor vehicle etc.)
* I agree to ensure that all required building regulations, approvals and other legal requirements are met, including the *Working with Children (Criminal Record Checking) Act 2004*.
* I agree to run the project as stated and provide a final project report and statement of income and expenditure (signed by the authorised officer) to demonstrate how the funds were used to the Office of Multicultural Interests by the agreed date which will be outlined in the payment advice letter.

|  |  |
| --- | --- |
| Name of the organisation: | Click here to enter text. |
| Legally authorised officer name: | Click here to enter text. |
| Legally authorised officer position: | Click here to enter text. |
| Legally authorised officer email: | Click here to enter text. |
| Legally authorised officer telephone: | Click here to enter text. |
| Legally authorised officer signature: | Click here to enter text. |
| Witness name: | Click here to enter text. |
| Witness signature: | Click here to enter text. |
| Date: | Click here to enter text. |

**\*Important:** If successful, this application becomes the grant agreement and is legally binding. The declaration must be signed by the person legally authorised to enter into contracts on behalf of the applicant organisation or auspice body. For incorporated associations this is generally the chairperson, president or equivalent officer. For not-for-profit organisations this is generally the chief executive officer. All formal correspondence will be directed to the legally authorised officer.

**\*Important:** If successful, this application becomes the grant agreement and is legally binding. The declaration must be signed by the person legally authorised to enter into contracts on behalf of the organisation or auspice body. For incorporated organisations this is generally the chairperson, president or equivalent officer. For local government authorities this is generally the chief executive officer. All formal correspondence will be directed to the legally authorised officer.

## Checklist

Before submitting your application, please ensure that the following steps have been completed. This checklist is included to ensure that you provide all the required information for assessment of your application.

Please tick off each step once complete and submit with your application:

The Funding Guidelines and Declaration have been read and understood by the legally authorised officer.

You have discussed your application with a member of the Office of Multicultural Interests’ Funding team.

All questions in this form have been completed.

A copy of the applicant organisation’s (or auspice body’s) Certificate of Incorporation – or equivalent evidence of the organisation’s (or auspice body’s) not-for-profit status – has been attached.

You have provided your ABN or, if you do not have an ABN, a ‘Statement by a Supplier form’ has been attached.

If your application is being auspiced, the Auspice Agreement form has been attached.

If your activity has a culture and arts focus, information about the involved professional artist or arts practitioner has been attached.

Letter/s of support from participating groups are included to identify their support and contribution to the activity, where applicable.

Any other documents to support your application have been attached (i.e. reports, samples of promotional material etc.), where applicable.

The Declaration of this form has been signed by the applicant organisation’s or the auspice body’s legally authorised officer.

## Application submission

Applications and supporting material must be submitted by **4.00pm, Monday 10 October 2022** by email to **grants@omi.wa.gov.au**

Late applications cannot be accepted.

Applicants will be sent a formal confirmation of receipt within one week of the application deadline.